



County Borough of Tynemouth.

THIRTY-FOURTH

ANNUAL REPORT

OF THE

Medical Officer of Health,

with the Sixth Annual Report upon the

Medical Inspection of School Children.

1914.

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County Borough of Tynemouth PUBLIC HEALTH COMMITTEE.

Chairman :—COUNCILLOR J. H. TEBB.

Vice-Chairman :—COUNC. JOHN T. PORTER.

THE MAYOR, COUNCILLOR H. GREGG

ALDERMAN	BOLTON	COUNCILLOR	HUTCHINSON
	ELLIS		MEIKLE
COUNCILLOR	MAUD BURNETT		MIDDLETON
	COATS		STEELE
	DOUGLASS		TELFORD
	FRATER		THIRKLE
	GIBSON		WAINE.
	J. H. HOGG		

STAFF OF HEALTH DEPARTMENT & SCHOOL MEDICAL DEPARTMENT.

*Medical Officer of Health, Administrative Tuberculosis Officer, and
Medical Officer to the Education Authority :*

JAMES A. HISLOP, M.D. (Brux.); L.R.C.P.; D.P.H.

Assistant Medical Officer of Health and Tuberculosis Officer :

WILLIAM YEATES, L.R.C.P.; L.R.C.S.; (Edin.)

Assistant School Medical Officer :

JAMES McCONNELL, M.B., (Durham); L.R.C.P., D.P.H.

Chief Sanitary Inspector and Inspector under the Food and Drugs Acts :

GIBSON EDWARDS, A.R.S.I.

Assistant Inspectors :

**WILLIAM L. McQUEEN, A.R.S.I.

JAMES STANLEY, A.R.S.I.

EDWARD E. MILBURN, Cert. R.S.I. (Temporary).

Superintendent of Cleansing Department :

THOMAS C. STORER.

Matron of Infectious Diseases Hospital :

MISS M. EWART.

Tuberculosis Nurse :

MISS MILLS.

Disinfector :

HENRY HODGSON.

Health Visitor :

MISS SWEETT.

Clerks :

ALBERT R. FORSYTH, Chief Clerk.

STANLEY H. MOFFAT, Clerk.

EUSTACE BAVIDGE, Junior Clerk.

SCHOOL MEDICAL DEPARTMENT.

School Nurse :—MISS SCOTT.

**TOM LITTLE, Clerk.

MISS WALLACE (Temporary).

** On Military Service after Declaration of War.

PUBLIC HEALTH OFFICE,

TYNEMOUTH,

30th APRIL, 1915.

*To the Mayor, Aldermen and Councillors
of the County Borough of Tynemouth.*

MR. MAYOR, MISS BURNETT AND GENTLEMEN,

I have the honour of submitting to you my sixth Annual Report, being the 34th report presented to you by successive Medical Officers.

The first three parts deal with Vital Statistics, Records of Disease and General Sanitary Administration, while the report upon the Medical Inspection of School Children, prepared by Dr. McConnell, will be found under Part IV.

The outbreak of War in the month of August caused many changes both in staff and in the policy of the Health Committee.

Three very important schemes have been deferred meantime on this account, namely :— a housing scheme for the erection of dwellings at Balkwell ; the provision of a new isolation hospital and combined institution for the treatment of cases of tuberculosis at Balkwell, and also the conversion of all privy middens to the water carriage system.

Inspector McQueen was called out to take up his duties with the Royal Engineers upon the declaration of war, and Inspector Milburn was appointed temporarily to fill the post. Three members of the staff of the Cleansing Department have also left to join the colours.

Miss Sweett resigned her office as Health Visitor at the end of the year, and Miss Minto was appointed in her place.

The population of the Borough for this year has been estimated upon a different basis from previous years, and the different rates calculated upon this estimate are not strictly comparable with those of previous years since the census of 1911.

I would again take the opportunity of thanking the Chairman and Members of the Health Committee for the assistance and courteous consideration which they have extended to me throughout the year, also to my colleagues and members of the staff of the Health Department as well as to other Corporation Officials for their valuable and ready help at all times.

I have the honour to remain,

Your obedient servant,

JAMES A. HISLOP,

Medical Officer of Health.

Statistical Summary.

1914.

Area of the Borough (including 84 acres of inland water)	4,372 Acres.
Families or Separate Occupiers (Census 1911)	12,783
Population (Census 1901)	51,366
Population (Census 1911)	58,816
Population (Estimated to 30th June 1914)	60,688
Births	1,736
Birth Rate per 1,000 of the Population	28·65
Deaths	992
Death Rate per 1,000 of the Population	16·3
Death Rate from Zymotic Diseases	1·56
Infantile Mortality Rate	132
Death Rate from Pulmonary Tuberculosis	1·23

Legal Summary.

LOCAL ACTS.

Tynemouth Improvement Act	...	...	...	...	1866
Tynemouth Corporation Water Act	...	...	...	...	1897
do.	do.	do.	...	...	1898
do.	do.	do.	...	...	1907
Tynemouth Corporation Act	...	...	...	...	1910

ADOPTED ACTS.

				Date of Adoption.
Public Library Act	...	...	...	13th July, 1868.
Infectious Diseases (Notification) Act 1889	...	...	...	23rd October, 1889.
Infectious Diseases (Prevention) Act 1891	..	...	...	11th September, 1891.
Public Health Acts Amendment Act 1890 :—				
Part II.	...	...	...	23rd March, 1892.
Part III.	...	...	...	9th February, 1891.
Part IV.	...	...	...	21st April, 1896.
Public Health Acts Amendment Act 1907 :—				
Part II. Sections 15 to 27 and 29 to 33	...	...	...	} 28th August, 1909.
Part III. Sections 34 to 47 and 49 to 51	...	...	...
Part IV. Sections 52 to 65 and 67, 68	...	...	...
Parts V., VI. and X.	...	...	...
(Certain adaptations were made by the Local Government Board with regard to Sections 25, 27, 35, 38, 59, 75 and 92)				
Part VII. Sections 79 to 86	...	...	...	} 1st February, 1909.
Part VIII. Sections 88 to 90	...	...	...
Part IX.	...	...	...
Notification of Births Act 1907	...	...	...	1st May, 1912.

I.

Vital Statistics.

VITAL STATISTICS.

POPULATION.

THE POPULATION of the Borough at the 30th June 1914, as originally estimated by the Registrar General, was 61,408.

This population was estimated on the assumption that the rate of increase during the last intercensal period 1901-1911 has continued, but in view of the fall in the rate of natural increase since 1911, and an increase in the loss by migration, a revised estimate has been made by the Registrar General for the middle of 1914, based upon the returns of births, deaths and migration.

The REVISED POPULATION for the Borough is 60,688 and upon this figure the various birth and death rates for the year have been calculated. This revised estimate will thus give a somewhat higher birth and death rate for the present year and the rates for previous years since the census of 1911 are not therefore strictly comparable with those of the present year.

The *natural* increase of population or the excess of the number of births over deaths was 744.

At the census of 1911 the population was 58,816 and the number of families or separate occupiers was 12,783 which gave an average of 4·5 persons per family or occupier.

THE AREA of the Borough is 4,288 acres exclusive of 84 acres covered by inland water.

For statistical purposes the Borough was, prior to 1911, divided into six districts, but the "Tynemouth Corporation Act, 1904," which came into operation during the last intercensal period, provided for the redivision of the Borough into 9 wards. At the last census the population was enumerated as located in these wards and statistical records are now based upon the population in wards instead of in districts as formerly.

DISTRIBUTION AND DENSITY OF POPULATION.

WARDS.				Population estimated to 30th June, 1914.	Area in Acres.	Persons to the Acre.
Central ...	...	...	...	5158	30	171·93
Collingwood ...	...	...	...	8019	2299	3·48
Dockwray ...	...	...	...	6721	82	81·97
Linskill ...	...	...	...	9185	314	29·25
Milbourn ...	...	...	...	5787	114	50·76
Percy ...	...	...	...	6539	762	8·58
Preston ...	...	...	...	6052	564	10·73
Rudyerd ...	...	...	...	5606	41	136·73
Trinity ...	...	...	...	7621	82	92·93
Borough of Tynemouth ...				60688	*4288	14·15

* Exclusive of 2 acres in Percy Ward, 81 in Collingwood Ward, and 1 in Preston Ward, which are covered by water.

From the table it will be seen that the average density of population was 14·15 persons per acre, but varied in different wards from 171·93 persons per acre in Central Ward to 3·48 in Collingwood Ward.

BIRTHS.

The number of births registered during the year was 1,753 of which 1,673 were legitimate and 80 illegitimate.

The transferable births received from the Registrar General were :—

INWARD BIRTHS.				OUTWARD BIRTHS.	
Legitimate	{	Male	—	{	2
		Female	—		—
Illegitimate	{	Male	—	{	8
		Female	1		8

It is necessary, therefore, to add one inward transfer, and to deduct 18 outward transfers, from the total births 1,753, in order to arrive at the actual number to be credited to Tynemouth. This will give a *nett total* of 1,736 births and a *birth rate* of 28·65 per 1,000 of the population.

869 of these births were males and 867 were females.

The births with corresponding rates were distributed as follows:—

BIRTHS AND BIRTH RATES.

WARD.	BIRTHS.	Birth Rate per 1,000 of Population.	No. of Illegitimate Births.	Percentage of Illegitimate Births to Total Births.
Central	173	33·5	4	2·31
Collingwood	221	27·5	6	2·71
Dockwray	266	39·5	10	3·75
Linkskill	188	20·4	6	3·19
Milbourn	234	40·4	9	3·80
Percy	123	18·8	7	5·69
Preston	135	22·3	4	2·96
Rudyard	182	32·4	16	8·79
Trinity	213	27·9	2	0·93
Inward Transfer ...	1	—	1	—
Borough of Tynemouth	1736	28·65	65	3·74
Mean of Ten Years— 1904-1913 ...	1787	31·87	69	3·83

The highest birth rates occurred in Milbourn and Dockwray Wards and the lowest in Percy Ward.

The birth rate of Tynemouth is considerably higher than that of England and Wales and of the Great Towns, as shown by the following figures :—

PERIOD.	England & Wales.	Great Towns.	Tynemouth.
1901-1905(Average)	28·1	28·9	33·5
1906-1910 (Average)	26·0	26·5	32·1
1911	24·4	25·6	28·0
1912	23·8	24·9	28·9
1913	23·9	25·1	28·8
1914	23·6	24·9	28·6

The birth rate is somewhat lower than last year and shows a marked falling off as compared with the two preceding quinquennial periods given in the table. The nett births show a decrease of 12 when compared with 1913.

ILLEGITIMACY.—There were 80 illegitimate births, but 16 of these have been transferred by the Registrar General to other districts, and one occurring outside the district requires to be added, leaving 65 as the total illegitimate births belonging to the Borough. The percentage of illegitimate to nett total births is therefore 3·74 per cent. This is in the proportion of 962·557 legitimate and 37·443 illegitimate births in every 1,000. The highest percentage of illegitimate births occurred in Percy and Rudyard Wards.

DEATHS.

The total number of deaths registered within the Borough was 1,038, but for comparative purposes the following corrections require to be made :—

(1) DEATHS OF RESIDENTS REGISTERED OUTSIDE THE BOROUGH.

PLACE OF DEATH.	1ST QR.	2ND QR.	3RD QR.	4TH QR.	TOTAL
Royal Victoria Infirmary, Newcastle-on-Tyne...	4	3	2	2	11
County Asylum, Morpeth	3	4	5	5	17
Fleming Memorial Hospital, Newcastle-on-Tyne ...	1	—	—	1	2
Royal Victoria Hospital, South Stoneham ...	—	—	1	—	1
Military Hospital, Newcastle-on-Tyne	—	—	1	—	1
Throat and Ear Hospital, Newcastle-on-Tyne...	—	1	—	—	1
South Shields Workhouse Infirmary	1	—	—	—	1
Gresham House, Newcastle-on-Tyne	1	1	—	—	2
St Joseph's Home, Newcastle-on-Tyne	1	—	—	—	1
Willington Quay (2) ; Patterdale, Stone, Ogle- thorpe, Scalby, Lowestoft, Dioitwich, Sher- burn Hill and Portsmouth (1 each)	—	3	3	4	10
Total ...	11	12	12	12	47

(2) DEATHS OF NON-RESIDENTS REGISTERED WITHIN THE BOROUGH.

PLACE OF DEATH.	NO.
Tynemouth Victoria Infirmary ...	7
Tynemouth Union Workhouse ...	73
Moor Park Hospital	1
Private Residences	2
Public Places or Buildings	4
Drowned in River	3
Accidents on Board Ship	3
Total ...	93

It is necessary, therefore, to add 47 deaths of residents registered outside the district to, and deduct 93 deaths of non-residents registered in the district from the total deaths 1,038, registered within the Borough, in order to arrive at the actual number to be credited to Tynemouth.

The *nett deaths* were, therefore, 992, which is equal to a death rate of 16·3 per thousand of the population and is an increase of ·7 per 1,000 upon the rate of the previous year.

212 deaths occurred in the Public Institutions in the Borough, and the following figures show the distribution of these deaths and the number of non-residents who died in the various institutions.

INSTITUTIONS.	DEATHS.	DEATHS OF NON-RESIDENTS.	
Victoria Jubilee Infirmary ...	32	...	7
Tynemouth Union Workhouse	164	...	73
Moor Park Hospital ...	16	...	1
	<hr/> 212		<hr/> 81

It will be seen from the table showing the comparative death rates, that the death rate for Tynemouth is higher than that for England and Wales and that of the Great Towns.

COMPARATIVE DEATH RATE PER 1,000 IN PREVIOUS YEARS.

PERIOD.	England & Wales.	Great Towns.	Tynemouth.
1901-1905(Average)	15·9	17·2	19·1
1906-1910(Average)	14·6	15·2	17·0
1911	14·6	16·4	15·7
1912	13·3	14·6	16·0
1913	13·7	14·3	15·6
1914	13·9	14·6	16·3

The following table shows the total deaths and death rates distributed according to the ward in which they occurred :—

DEATHS AND DEATH RATES IN WARDS.

WARDS.	Total Deaths.	Death Rate per 1,000 of Population.
Central ...	95	18·41
Collingwood ...	111	13·84
Dockwray ...	131	19·49
Linskill ...	104	11·32
Milbourn ...	115	19·87
Percy ...	86	13·15
Preston ...	79	13·05
Rudyard ...	153	27·29
Trinity ...	118	15·48
Borough of Tynemouth ...	992	16·34
Mean of 10 years—1904-1913...	976	17·24

The highest death rate was recorded in Rudyard Ward and the lowest in Linskill Ward. The death rate for the whole Borough shows a decrease of ·9 per thousand as compared with the average rate of the previous ten years.

THE DEATHS QUARTER BY QUARTER WERE :—

PERIOD.	Number of Deaths.	Death Rate per 1,000.
First Quarter ...	246	16·21
Second Quarter...	250	16·47
Third Quarter ...	243	16·01
Fourth Quarter...	253	16·66

MORTALITY AT DIFFERENT AGES.—The mortality rates at different age groups per 1,000 of the population were :—

DEATHS.	Age Group.	Rate per 1,000 of Population.
230	Under 1 year ...	3·79
131	1 to 5 years ...	2·16
86	5 to 25 years ...	1·41
327	25 to 65 years ...	5·39
218	65 years and upwards ...	3·59
992	All Ages.. ...	16·34

INFANTILE MORTALITY.—There were 230 deaths of children under 1 year of age, which is in the proportion of 132 deaths to every 1,000 children born. There were 6 deaths in illegitimate infants under 1 year old, which gives an *illegitimate infant mortality* of 92·3 per 1,000 births.

The following are the infantile mortality rates for Tynemouth compared with those of the Great Towns and England and Wales for the last ten years.

COMPARATIVE INFANTILE MORTALITY RATES.

YEAR.	1905	1906	1907	1908	1909	1910	1911	1912	1913	1914
Tynemouth ...	159	151	122	138	127	125	123	102	123	132
Great Towns ...	140	155	127	128	118	115	140	101	117	113
England & Wales	128	133	118	121	109	106	130	95	109	105

The rate for the year is higher than it has been since 1908. The summer was warm and dry like the summers of 1911 and 1913, and it will be noted in the table below showing the analysis of the causes of death that

the number of cases of diarrhoeal diseases is practically the same during these dry years, but the deaths from bronchitis and pneumonia during 1914 were somewhat excessive. It is somewhat suggestive that cases of measles and whooping cough were more prevalent during 1914 and this may account for the increased mortality attributable to Respiratory Diseases.

The causes of death during 1914 and the previous five years were as follows :—

CAUSE.	1914	1913	1912	1911	1910	1909
Common Infectious Diseases	5	4	11	10	12	13
Diarrhoeal Diseases ...	40	39	16	41	24	22
Wasting Diseases ...	79	79	66	84	92	112
Tuberculous Diseases ...	1	11	3	10	6	5
Bronchitis and Pneumonia ...	47	25	29	32	50	36
Other Causes ...	58	57	52	27	40	51
Totals ...	<u>230</u>	<u>215</u>	<u>177</u>	<u>204</u>	<u>224</u>	<u>239</u>

The work done by the Guild for Mothers and Babies and also that accomplished by the Health Visitor will be found in page 50 under Infant Hygiene.

II.

Records of Disease.

RECORDS OF DISEASE.

ZYMOTIC DISEASES.

The principal zymotic diseases commonly recognised are seven and caused 95 deaths, as follows :—

Diarrhœa and Enteritis (under two years)	...	52
Measles	...	9
Scarlet Fever	...	5
Whooping Cough	...	10
Diphtheria	...	12
Enteric Fever	...	7
Smallpox	...	0
		—
		95

The following table shows the deaths from these diseases and the mortality rate per 1,000 of the population, distributed according to the wards in which they occurred.

ZYMOTIC DEATHS AND MORTALITY RATES.

WARDS.	Deaths from Seven Chief Zymotic Diseases.	Mortality Rate per 1,000.
Central	6	1·16
Collingwood	7	0·87
Dockwray	18	2·68
Linskill	11	1·19
Milbourn	12	2·08
Percy	10	1·52
Preston	6	0·99
Rudyerd	12	2·14
Trinity	13	1·70
Borough of Tynemouth ..	95	1·56

The mortality rate was lowest in Collingwood Ward and highest in Dockwray, Rudyerd and Milbourn Wards. The rate for the Borough as a whole is lower than last year.

MORTALITY RATES PER 1000 SINCE 1905.

Year.	1905	1906	1907	1908	1909	1910	1911	1912	1913	1914
Deaths	74	138	98	81	71	100	96	78	97	95
Rates	1·35	2·50	1·75	1·43	1·23	1·71	1·60	1·34	1·60	1·56

The diseases to which the Infectious Diseases (Notification) Act, 1889, applies are :—Smallpox, Cholera, Diphtheria, (including Membranous Croup), Erysipelas, Scarlet Fever, and the fevers known by any of the following names :—Typhus, Typhoid, Enteric, Relapsing, Continued, Puerperal, Cerebro-Spinal and Acute Poliomyelitis.

The number of notifications received from medical practitioners during the year was 598 (including 12 notifications of Ophthalmia Neonatorum), an increase of 180 on the previous year. The increase was mainly due to the extra number of cases of scarlet fever.

Table showing the number of Notifications and Deaths.

YEAR.	Smallpox.	Deaths.	Scarlet Fever.	Deaths.	Diphtheria.	Deaths.	Enteric Fever.	Deaths.	Typhus Fever.	Deaths.	Puerperal Fever.	Deaths.	Erysipelas.	Deaths.	Cerebro-Spinal Fever	Deaths.	Acute Poliomyelitis	Deaths.
1904	95	9	131	2	16	4	13	4	...	...	1	...	84	3	...	...	...	...
1905	39	1	67	1	43	6	17	2	...	...	7	7	85	1	...	...	...	...
1906	1	...	142	6	69	9	*23	5	...	...	2	...	83	1	...	...	...	...
1907	...	...	146	5	56	10	6	...	...	...	5	3	97	4	...	...	...	...
1908	...	...	127	2	61	7	16	3	1	...	1	...	61	1	...	...	...	...
1909	...	...	200	13	81	12	10	1	1	...	1	1	63	1	...	...	...	...
1910	...	...	91	3	78	11	8	4	...	...	3	1	40	...	...	...	...	...
1911	...	...	42	...	50	6	§33	3	...	...	3	1	36	1	...	...	...	...
1912	1	...	206	2	59	4	11	4	...	...	2	2	46	...	1	1	2	...
1913	...	...	281	13	71	10	†25	3	...	...	3	1	35	1	...	...	3	...
1914	...	...	373	5	92	12	57	7	...	...	2	1	59	3	2	2	1	...

* Includes 3 Cases Continued Fever.

§ Includes 1 Case Continued Fever.

† Includes 1 case of Continued Fever.

SMALLPOX.—Cases notified, 0; deaths, 0.

Fourteen contacts were notified. The contacts were seamen or passengers arriving by steamers on which a case of smallpox had occurred during the voyage. All were kept under observation, but none developed the disease. Through the courtesy of Mr. Percival, Clerk to the Guardians, I am enabled to give the following figures relative to the vaccination of children within the Borough.

VACCINATION RETURNS, 1907—1913.

	1	2	3	4	5	6	7	8	9
Year.	Births.	Vaccinated.	Insusceptible.	Dead.	Conscientious Objectors.	Postponed	Removed.	Unaccounted.	Percentage not Vaccinated including Cols. 5, 6, 7, 8.
1907	1796	1,392	6	182	94	55	15	52	12.0
1908	1896	1,255	7	180	350	24	24	51	23.9
1909	1875	1,002	11	183	515	26	26	79	36.2
1910	1788	929	3	157	626	16	23	43	39.5
1911	1671	816	11	147	653	11	10	23	41.7
1912	1752	866	6	117	716	8	16	23	43.5
1913	1766	802	3	150	759	16	12	14	46.0

The figures show a gradual increase in the percentage of unvaccinated children. As pointed out in previous reports the menace to the community of a widespread epidemic is in proportion becoming greater each year.

CHOLERA AND PLAGUE.—No cases or contacts were notified during the year.

SCARLET FEVER.—Cases, 373 ; deaths 5 ; fatality per cent 1.34.

The number of cases notified shows an increase of 92 over the previous year. The notifications reached their maximum in October. During the years 1910 and 1911 this disease had a markedly low degree of prevalence, but the annual number of cases gradually increased during the succeeding years.

The year 1914 opened with 46 cases in the month of January, and the incidence gradually declined towards the middle of the year, but a recrudescence occurred in the months of September and October when the number of cases reported were 41 and 50 respectively. The fatality rate was very low and indicates a type of fever of extreme mildness, which is a striking contrast to the comparatively high fatality rate of 4.9 per cent during the previous year. Many of the cases in the year now reported upon were so mild that the parents stated that they had neither seen a rash, nor had the child complained of its throat, and attention was only directed to the nature of the illness when peeling was detected or another member of the family had been attacked. The cases occurring in each locality month by month were as follows :—

WARD.	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
Central ...	6	1	3	2	1	—	—	1	1	2	1	—
Collingwood ..	3	5	10	2	1	1	6	1	6	5	8	1
Dockwray ..	3	7	—	2	5	—	7	1	3	4	1	3
Linskill ...	13	5	2	1	2	1	4	—	3	9	3	8
Milbourn. .	—	—	2	5	1	6	4	3	3	4	2	3
Percy ...	2	5	—	—	1	1	5	5	9	2	1	1
Preston ...	10	7	1	4	3	1	3	3	11	18	2	11
Rudyerd ...	4	2	—	3	3	3	4	1	1	3	1	3
Trinity ...	5	4	8	3	4	4	6	1	4	3	5	5
Total...	46	36	25	22	21	17	39	16	41	50	24	35

The number of cases removed to hospital was 262 or nearly 70 per cent. All the houses were visited to discover the source of infection. In addition to isolation of the patient, the other means of prevention adopted were disinfection of the home, the free supply of disinfectants, and the exclusion of contacts from school for specified periods. In all cases library books were disinfected, or if necessary, destroyed.

DIPHTHERIA :— Cases notified, 92 ; deaths, 12 ; fatality per cent 13·0.

These cases show an increase of 21 over the previous year, but the fatality rate is lower. The highest number of notifications received in any month was 16 during February. The number of cases removed to the isolation hospital during the year was 53, or 57·4 per cent.

Numerous swabs from “contacts” were taken and in this way 15 mild or carrier cases were discovered. Four of these showed no throat symptoms nor gave evidence of constitutional disturbance and were not notified, but suitable treatment and home isolation was kept up until negative swabs were obtained.

The remaining 11 cases occurred in institutions, and as slight redness of fauces was found, although the patients had no constitutional symptoms, all were notified as diphtheria and removed to hospital for treatment, as no suitable isolation could be effected in the institution in which they occurred.

The cases occurring in each locality month by month were as follows :—

WARD.	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Central ...	—	—	—	—	1	—	—	—	—	—	—	1
Collingwood ...	1	3	1	—	—	—	1	—	1	1	1	—
Dockwray ...	4	—	3	1	2	—	—	—	1	1	1	2
Linskill ...	1	3	2	4	2	1	—	1	2	4	3	—
Milbourn...	—	2	—	1	—	—	—	—	1	—	—	—
Percy ...	1	—	—	1	1	—	2	—	—	1	—	—
Preston ...	1	4	1	1	1	—	—	1	—	—	—	1
Rudyerd ...	—	2	2	—	—	—	—	1	—	—	—	1
Trinity ...	1	2	1	2	1	2	—	1	1	3	—	3
Total...	9	16	10	10	8	3	3	4	6	10	5	8

The following table shows the number of deaths and fatality of the disease in the Borough, and the succeeding table gives the mortality rate compared with England and Wales :—

Year.	1905	1906	1907	1908	1909	1910	1911	1912	1913
Cases notified	37	69	56	61	81	78	50	60	71
Deaths ...	6	9	10	7	12	11	6	4	10
Fatality per cent	16·2	13·0	17·8	11·5	14·8	14·1	12·0	6·6	14·0

MORTALITY RATE PER 1000 COMPARED WITH ENGLAND AND WALES.

Year.	1905	1906	1907	1908	1909	1910	1911	1912	1913	1914
Tynemouth	·11	·16	·17	·12	·20	·18	·11	·06	·16	·19
England & Wales	·16	·17	·16	·15	·14	·12	·13	·11	·12	·15

Medical men are now taking greater advantage of the facilities offered by the bacteriological laboratory for the assistance in the recognition of the disease and for the examination of swabs from the throats of convalescent patients to ascertain their freedom from infection.

489 swabs were examined from the throats of contacts, convalescents or cases suspected to be suffering from the disease.

77 phials of diphtheria antitoxin of 2,000 units each were distributed to medical men during the year for use in cases where the patients were unable to pay for them.

The methods of prevention adopted were isolation of the patient, exclusion of contacts from school, examination of contacts and disinfection of the home. Two negative swabs are obtained from every case in the hospital before the patient is discharged.

ENTERIC FEVER. Cases notified 57 ; deaths 7 ; fatality per cent. 12·2.

Forty-eight cases or rather over 84% were removed to hospital and nine cases were treated at home.

Three of the cases notified as enteric fever gave a negative Widal's reaction, two a doubtful reaction and in ten cases no specimen of blood was obtained for examination.

The cases occurring in each locality month by month were as follows :—

WARD.	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov	Dec.
Central ...	—	—	—	2	—	—	—	—	1	—	—	—
Collingwood ..	1	—	1	—	—	—	4	2	—	5	2	—
Dockwray ..	—	2	3	1	5	1	—	—	—	—	1	1
Lirskill ...	—	—	—	1	—	—	1	1	1	1	—	1
Milbourn ...	—	1	—	1	—	—	—	1	—	—	—	1
Percy ...	1	—	—	—	—	—	—	—	—	—	1	1
Preston ...	—	—	—	—	—	—	3	—	1	—	—	—
Rudyerd ...	—	—	—	1	—	—	—	—	—	1	—	2
Trinity ...	—	1	—	—	—	—	—	1	—	1	1	—
Total...	2	4	4	6	5	1	8	5	3	8	5	6

In 7 houses there were 17 cases, infection having spread from one member of the family to another before the first case had been removed to hospital. Several of these cases were discovered by constant visitation of the homes in order to keep the other inmates and contacts under supervision until the incubation period had passed.

In one family, R.D., the mother was the first to take ill and she had evidently infected other three children in the house as they were kept under observation and all sickened within three weeks of the mother's removal to the hospital.

The first patient's brother was a seaman and had not felt well while staying in his sister's house, about three weeks prior to the patient's onset of illness, when the case R.D. was notified and inquiries instituted, it was ascertained that he had gone to sea and had been ill during the voyage, but was taken ashore and died in a hospital.

Three cases, I.R., occurred during the last week of February in the same house and it was discovered that these cases had some association with a boy who had been ill some time previously with an indefinite illness, but a blood specimen could not be obtained.

These cases were followed towards the end of March by 5 cases in the same neighbourhood, three occurring in the same street, and although contact with the family, I.R., was denied, it seems more than likely that this was the probable source of infection.

In another house in which two cases occurred it was found that a child had died from consumption of the bowels five days previously, after an illness of about a month. Blood specimens for Widal's reaction were taken from four contacts, but these proved negative and no further cases were reported.

Seven cases, occurring at Chirton Green, all lived within a few doors of one another and undoubtedly originated from the same source, a young boy of 9 years A.L., who had been ill with an indefinite form of illness and it was only in its later stages that the true nature of the ailment was suspected and subsequently confirmed by Widal's reaction.

R.H. another case reported at the same time from a different district was engaged to a relative of one of these families and had been visiting the house.

In another house in which two cases occurred, the two patients appear to have been infected from the same source as the onset of illness in each case occurred within a few days of one another. The history was that they had been on a camping out holiday and took ill about a fortnight after returning home.

Two cases developed their illness while at sea, one was a marine engineer and the other a fireman. The Port Authorities were duly notified of the illnesses.

In five cases, all occurring during the first three weeks in October, shellfish had been eaten, and in four of the cases the onset of illness developed in about a fortnight afterwards. Intimation of this fact was made to the Authority from whose district it was believed these shellfish had been obtained and the gathering of the shellfish from this source was afterwards prohibited.

Three cases, G.P., H.D. & I.T.B., were probably infected while working outside the district.

In four cases, G.M., W.M., H.B., & M.P., there was a history of contact with a previous case, and in one instance, A.S., the patient's brother had

been at home some time with an indefinite illness, but as he had left the home and the family did not know his whereabouts, a specimen of blood could not be obtained.

Of the remaining cases no definite source of infection could be traced.

The precautions taken were supervision of contacts, disinfection of the house and isolation of the patient.

ERYSIPELAS :—Cases notified, 59 ; deaths, 3 ; fatality per cent, 5·0.

PUERPERAL FEVER :—Cases notified, 2 ; death, 1 ; fatality per cent, 50·0.

In both cases a midwife was primarily in attendance at birth, but a medical practitioner was subsequently called in. In each case instructions were given as to disinfection of the midwife's person, and her outer garments and bag with instruments were carefully disinfected at the disinfecting station.

ACUTE POLIOMYELITIS :—Cases notified, 1 ; deaths 0.

The case was a female, notified in September, age $1\frac{1}{4}$ years, and had paralysis of both legs. The patient recovered without deformity.

CEREBRO-SPINAL FEVER :—Cases notified, 2 ; deaths, 2 ; fatality per cent, 100·0.

Both cases proved fatal. The one case had no relation to the other and each lived in a different district, and in both instances notification was received after death had occurred so that no specimen of spinal fluid was obtained for examination.

MEASLES.—Deaths, 9 ; mortality rate per 1000, 0·14.

All of the deaths were of children under 5 years of age, and were distributed as follows :—

Percy Ward, 4 ; Central, Dockwray, Milbourn, Preston and Rudyerd Wards 1 each.

The deaths recorded during previous years were :—

	Year.	1905	1906	1907	1908	1909	1910	1911	1912	1913
Deaths	...	6	19	23	14	13	41	11	32	5
Rates per 1,000		·11	·34	·41	·24	·22	·70	·18	·53	·08

Information of the number of cases of measles amongst children of school age is obtained from the weekly list of returns sent to the Education Office by the teachers at the various schools. The total number of cases so notified since 1911 is as follows :—

1911.	1912.	1913.	1914.
254	601	60	833

Leaflets are distributed at the homes where cases of the disease have been reported and attention drawn to the fatality of the disease during the early years of life. All children of an affected household attending the infant department were excluded from school, but children who have had measles and attending the senior classes were allowed to return to school.

WHOOPIING COUGH.—Deaths 10 ; mortality rate per 1,000, 0·16.

The deaths were distributed as follows :—

Dockwray, Linskill and Percy Wards, 2 each ; Central, Collingwood, Preston and Trinity, 1 each.

The deaths recorded during previous years were :—

Year.	1905	1906	1907	1908	1909	1910	1911	1912	1913
Deaths	35	4	28	20	18	19	17	11	3
Rates per 1,000	·64	·07	·50	·35	·31	·32	·28	·18	·04

The number of cases of whooping cough amongst children of school age notified on weekly returns by the teachers of the various schools since 1911, was as follows :—

1911	1912	1913	1914
232	218	30	196

DIARRHOEA AND ENTERITIS —Deaths under 2 years, 52. Mortality per 1000 births, 29·9.

The mortality rate in England and Wales for infants under 2 years was 20·4 and for the Great Towns 26·1. Thirty-six of the deaths from diarrhoea occurred during the months of September and October. The preventive measures have been discussed in previous years, and this year in addition to instructions given by the Health Visitor regarding preparation and storage of milk and food stuffs, a leaflet on flies as carriers of infective material, and a leaflet on weaning has been prepared and left with parents.

Notice has also been given for the frequent and periodical removal of manure from stables, mews and other premises, especially from places in proximity to the neighbourhood of dwelling houses.

OTHER DISEASES.

Under this heading are included certain diseases which are not classed as zymotic but are of special interest.

OPHTHALMIA NEONATORUM.—Cases notified 10. Two cases were notified twice.

This is a disease characterised by a purulent discharge from the eyes of an infant commencing within 21 days from birth. It was made notifiable on the 1st April by an Order of the Local Government Board dated 5th February, 1914.

Six of the cases notified occurred in the practice of a midwife and four in the practice of a medical practitioner. In each of the cases notified by a midwife, a medical man was subsequently called in.

CANCER AND MALIGNANT DISEASES.—Deaths 50; mortality rate per 1,000, 0·82.

The deaths and rates for the preceding 10 years were as follows :—

Year.	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913
Deaths	37	46	36	33	42	28	46	46	44	58
Rate per 1,000	·68	·84	·65	·59	·74	·48	·79	·77	·73	95

One death occurred between 5 and 15 years; 11 between 25 and 45 years; 26 between 45 and 65 years; and 12 were of persons over 65 years of age.

RESPIRATORY DISEASES.—Deaths, 184; mortality rate per 1,000, 3·03.

The deaths during the last 10 years were as follows :—

Year.	1905	1906	1907	1908	1909	1910	1911	1912	1913	1914
Bronchitis ...	109	101	93	114	76	80	86	92	80	81
Pneumonia ...	43	42	39	37	74	84	54	64	57	95
Other Respiratory Diseases	14	8	9	2	15	16	10	13	8	8
Total deaths ...	166	151	141	153	165	180	150	169	145	184
Rate per 1,000	3·05	2·73	2·52	2·70	2·87	3·09	2·54	2·82	2·39	3·03

The number of deaths from respiratory diseases was greater than for some years previously, and 82 of the deaths occurred in children under 5 years of age.

TUBERCULOSIS.

All forms of tuberculosis were made compulsorily notifiable as from 1st February, 1913.

The number of cases notified was as follows :—

	Form A.		Form B.		Total.
	Males.	Females.	Males.	Females.	
Pulmonary ...	68	50	4	2	124
Non-Pulmonary...	33	30	6	7	76
	—	—	—	—	—
Total	101	80	10	9	200

25 cases were notified twice.

(1). PULMONARY TUBERCULOSIS :—Deaths 75. Mortality rate per 1,000 1·23.

Of the 75 deaths 50 occurred in private residences and 25 in public institutions.

The intervals which elapsed between receipt of notification and date of death are seen in the following table :—

Interval.			Deaths.		
			1914.	1913.	1912
Under 1 week	...	...	17	9	29
Under 1 month	...	...	13	5	23
1 - 3 months ...	...	...	14	14	26
3 - 6 months	...	...	14	8	15
6 - 12 months	...	...	6	8	7
Over 1 year ...	...	...	11	8	0
			—	—	—
Total			75	52	100

The table shows that 93 per cent. of the fatal cases occurred within 6 months of the notification in 1912, 69 per cent. in 1913, and 77 per cent. in 1914.

The deaths and corresponding mortality rates during the last 10 years were as follows :—

Year.	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913
Deaths...	68	91	96	88	75	64	61	74	100	52
Mortality rate...	1·26	1·67	1·70	1·57	1·32	1·11	1·04	1·20	1·67	0·85

The number of notifications and distribution of the deaths with the mortality rate in each ward was as follows :—

WARD.	Population.	Notifications.	Deaths.	Mortality Rate.		
				1914	1913	1912
Central ...	5158	20	12	2.32	1.94	1.77
Collingwood	8019	14	10	1.24	0.87	0.88
Dockwray ...	6721	15	7	1.04	0.74	2.26
Linskill ...	9185	9	6	0.65	0.65	1.43
Milbourn ...	5787	17	10	1.72	1.21	1.75
Percy	6539	9	7	1.07	0.15	1.70
Preston ..	6052	9	3	0.49	0.49	0.83
Rudyard	5606	15	14	2.49	1.43	3.62
Trinity ...	7621	16	6	0.78	0.65	1.33
Whole Borough	60688	124	75	1.23	0.85	1.67

It will be noticed that there is an increase in the mortality rates in all the wards as compared with 1913, except Linskill and Preston Wards where the rate remains the same.

NOTIFICATIONS AND DEATHS IN RELATION TO AGE AND SEX INCIDENCE.

YEARS.		Under 1.	1-5	5-15.	15-25	25-45	45-65	65 & over	Total
Notifications	{ Males	2	1	7	13	33	15	1	72
	{ Females	0	0	8	18	22	4	0	52
Total									124
Deaths	{ Males	1	2	2	7	23	10	—	45
	{ Females	0	0	4	7	17	2	—	30
Total									75

Inquiry was made in each case as to sleeping accommodation and whether the patient had a separate bedroom. The results are summarised in the following table :—

	Separate bedroom.	Separate bed but other occupants in same room	No separate bed and other occupants in same room.	Not visited by request, fatal before notification, not traced, or in public institution.	Totals.
Pulmonary	31	15	65	13	124
Non-Pulmonary ...	7	6	56	7	76
Totals ...	38	21	121	20	200

(2) NON-PULMONARY TUBERCULOSIS.—Deaths 39 ; mortality rate per 1,000, 0·64.

NOTIFICATIONS AND DEATHS IN RELATION TO AGE AND SEX INCIDENCE.

YEARS.		Under 1	1-5	5-15	15-25	25-45	45-65	65 & over	Total
Notifications	{ Males	2	14	13	8	2	—	—	39
	{ Females	1	11	19	4	2	—	—	37
Total									<u>76</u>
Deaths	{ Males	3	9	2	2	1	—	1	18
	{ Females	2	12	4	1	—	2	—	21
Total									<u>39</u>

63 notifications were on Form A and 13 on Form B.

The localisation of the disease amongst the notified cases was as follows :—

Glands	-	-	-	38
Peritoneum	-	-	-	9
Joints	-	-	-	8
Spine	-	-	-	2
Meninges	-	-	-	8
Bones	-	-	-	5
Miscellaneous	-	-	-	6
Total				<u>76</u>

The scheme for the institutional treatment of tuberculosis has worked very satisfactorily, and the beds at Moor Park Hospital, Woodburn Sanatorium, Edinburgh, and at Stannington Sanatorium for children, have been continuously in use throughout the year.

Mention was made in last year's report that the Committee thought some economy might be effected, if, in building a new isolation hospital at Balkwell, a combined institution for the treatment of tuberculosis could be erected on adjacent ground.

With this object in view the Borough Surveyor has prepared plans providing accommodation for 24 patients.

The total amount of the capital grant available in aid of the cost of the tuberculosis sanatorium and hospital on the allocation which has been made on the basis of population, is £1,720. Any balance of expenditure on the tuberculosis buildings, which is not met by the capital grant, may be defrayed by means of a loan, and the annual loan charges may be included in the Council's maintenance account, in respect of the tuberculosis scheme, towards the net deficiency of which a grant of one half will be payable by the Board.

Owing to the outbreak of war the proposal to erect the combined institution has meantime been deferred and it is intended for the present to carry on the institutional treatment of tuberculosis on the lines originally suggested.

Some time after the outbreak of war an application was received by the proprietress of Woodburn Sanatorium asking in view of the exceptional circumstances, that an increased grant should be paid for patients.

After consultation with the Board, the Committee resolved that as from 1st April, 1915, the amount payable for beds at Woodburn Sanatorium be increased by £10 per bed per annum.

At a meeting of the Health and Insurance Joint Sub-Committee, held on 20th November, the Chairman reported that the Poor Children's Holiday Agency was considering whether it would be possible to supplement the beds for children at the Stannington Sanatorium by utilising their Home at Ryton-on-Tyne for incipient and pre-tuberculous cases. A Sub-Committee was appointed, the premises were inspected, and they recommended, subject to the approval of the Board, that a sum of £40 per annum be contributed to the funds of the Holiday Association towards their expenses during the continuance of this arrangement, which might form part of the scheme for the treatment of tuberculosis, and that the cost be defrayed out of the amount agreed to be set apart annually for tuberculosis work.

The number of beds available at the Home were four, and many children in a pre-tubercular state, had the scheme matured, would have had the opportunity of enjoying the fresh air and good food obtainable in a country house for short periods throughout the year.

Owing to the want of educational facilities however at the home, the Board could not see their way to give approval to the arrangement, and allow a grant proportionate to the expenditure incurred thereby.

Terms have also been agreed to during the current year, whereby cases of surgical tuberculosis will be treated at the Tynemouth Victoria Jubilee Infirmary.

The work of After-care has received a considerable amount of attention and in the month of August a joint report was submitted by the Medical Officer of Health and Tuberculosis Officer upon the After-care of tuberculosis patients on their discharge from hospitals or sanatoria. After

consideration it was agreed that all patients who had returned from these institutions should be interviewed and that a sum available be devoted to the provision of ancillary benefits for non-insured patients on the basis of benefits now received by insured persons; that patients be assisted in obtaining better housing accommodation and more suitable employment and that discharged patients be visited in their homes by voluntary lady members of the Health and Insurance Joint Sub-Committee.

The Agreement between the Corporation and the Insurance Committee has now been approved and is dated the 24th March, 1915. The agreement, however, came into force as from 1st April, 1913, and shall remain in force for a period of 35 years from that date unless either party to the agreement, with the prior approval of the Local Government Board, shall give to the other party at least twelve month's notice of their desire to determine the agreement.

Subject to the approval of the Board and the Insurance Commissioners, the agreement may however be modified or extended in such manner (except as to the period of its continuance) as the Corporation and Committee may mutually agree, provided the Council in so doing shall not make for the Committee arrangements less adequate than those specified in the scheme.

REPORT OF TUBERCULOSIS OFFICER ON INSTITUTIONAL TREATMENT.

The work of the dispensary and hospital has been carried out upon lines similar to those at the inauguration, with changes in details, where it was thought improvement could be made.

DISPENSARY.

The number of cases examined during the year has been 141, and the number of new cases attending the dispensary 136. The following classification applies to the above:—

		Pulmonary.		Non-Pulmonary.		Total.
		M.	F.	M.	F.	
Number Examined	{ Insured ...	27	10	3	1	41
	{ Uninsured	5	23	1	1	30
	{ Children ...	23	17	12	18	70
	Total	55	50	16	20	141

		Pulmonary.		Non-Pulmonary.		Total.
		M.	F.	M.	F.	
Treated at Dispensary	{ Insured ...	25	8	3	1	37
	{ Uninsured	4	23	1	1	29
	{ Children ...	23	17	12	18	70
	Total	52	48	16	20	136

The result of treatment with tuberculin at the dispensary continues to show that those treated make good progress in most cases, particularly so amongst the children. I feel more than ever convinced that two great sections of the community must be dealt with in a masterly manner if the desired end is to be achieved, viz. :— the children, whom I consider most important, and the advanced cases who are a menace in spreading the disease amongst those with whom they come in contact. The great question of permanent isolation therefore arises, and no doubt will be recognised as the rational, and only safe treatment of these cases, to insure the stamping out of this treacherous disease.

The average gain in weight has been :— in men, $4\frac{1}{2}$ lbs. ; in women, $5\frac{1}{2}$ lbs. ; and in children, 2 lbs.

The distribution of the cases on the 31st December, 1914, was as shown in the following table :—

	Attending at end of year.	Not attending.	In sanatoria.	Left district.	Not able to attend.	Died.	Total.
Adults ...	28	9	8	1	5	15	66
Children ...	40	4	3	7	5	11	70
Total	68	13	11	8	10	26	136

Of the adults 33 were men and 33 women.

Of the children, 35 were males and 35 were females. It is a strange coincidence that the sexes should be so equally divided in both adults and children.

Of the men 9 are working, 10 not working, 6 are in sanatorium, whilst 8 proved fatal. Of the 10 not working, 3 are unfit for work, and the remaining 7 could follow some form of light employment. It may be said therefore that about 48·4% of the men under treatment could work at some form or other of employment.

Of the women under treatment 10 are working, 16 are not working, and 7 proved fatal. Of the 16 not working, 11 are unfit for work and 5 could work at some form of light occupation, or 45·5% of the whole could follow work of some form or other.

Of the children under treatment, 61 are of school age and 9 not of school age. Of the school children, 29 have been excluded from school whilst 32 are able to attend. Arrangements have been made to record the attendances of those able to attend school, who have also to attend for treatment at the dispensary, so that the grant for attendance at school will not suffer.

SANATORIA.

The number of cases treated in sanatoria for the year ending December 31st, 1914, was 69, all of whom were pulmonary cases. Of these 39 were males and 30 females. Of the 69, 42 were insured persons, 31 males and 11 females.

They were distributed as follows :—

	In Sana- torium 1st Jan., 1914.		Admitted during year.		Discharged during year.		Died.		In Sanator'm on 31st Dec., 1914.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Woodburn ...	4	2	13	11	13	11	—	—	4	2
Moor Park ...	2	4	16	10	14	13	3	—	1	1
Stannington	3	0	1	3	3	1	—	—	1	2

The following table shows the total number of days spent in sanatorium with the average number of days per patient in each institution, and average gain in weight :—

	Total Number of Days.	Average Number of Days per Patient.	Average Gain in Weight.	
			M.	F.
Woodburn ...	2183	72·7	5¼ lbs.	7¼ lbs.
Moor Park ...	2117	66·1	7¼ lbs.	8 lbs.
Stannington	1062	151·7	6¼ lbs.	6¼ lbs.

Of those discharged from Woodburn and Moor Park, the following is a Summary :—

		Working.	Not Working	Left District.	Died.	Total.
WOODBURN ...	Men ...	7	2	2	2	13
	Women...	6	3	1	1	11
	Total ...	13	5	3	3	24
MOOR PARK ...	Men ...	6	5	—	6	17
	Women...	9	2	—	2	13
	Total ...	15	7	0	8	30

The number of contacts examined during 1914 was 450, the number infected was 26 or 5·8 %, the majority of whom are now receiving treatment at the dispensary.

The following list shows the trade or occupation followed by those who attended the dispensary :—

- (1) METAL WORKERS 5.—Plater 1; Platelayer 1; Fitter 1; Galvanizer 1; Tinsmith 1.
- (2) SHIPYARD WORKERS 11.—Holder-up 1; Rivetters 2; Caulker 1; Trimmer 1; Labourers 6.
- (3) SEAMEN 2.—Boatswain 1; Steamboatman 1.
- (4) FACTORY AND WORKSHOP EMPLOYEES 6.—Milliner 1; Carpenter 1; Typist 1; Bottle-washer 1; Joiners 2.
- (5) SHOPKEEPERS 1.—Tailor 1.
- (6) DOMESTICS 26.—Housewives 20; General Servants 4; Waitress 1; Housekeeper 1.
- (7) COALMINERS.—Miners 3.
- (8) MISCELLANEOUS—Theatre Property Master 1; Bath Attendant 1; Theatre Cleaner 1; Cartman 1; Hairdresser 1; Message Boy 1; Clerks 2; Unoccupied 4; School Children 61; Children under School-age 9.

TUBERCULIN TREATMENT.

(a) ADULTS 66.

(1) PULMONARY.—Cases 60 ; Males 29 ; Females 31.

Of the males 3 are not responding to treatment owing to the advanced condition of the disease ; 8 have died, while the remaining 18 are showing marked improvement and gaining weight.

Of the females, 5 are in an advanced state of the disease, and are not making any progress, 4 are stationary, 7 have died, and the remaining 15 are improving and gaining weight.

(2) NON-PULMONARY.

(a) Glandular 3. Males 2 ; Females 1.

Of the males one has made marked progress whilst the other is stationary. The female is progressing favourably.

(b) Osseous 2. Male 1 ; Female 1.

Both improving rapidly under treatment.

(c) Skin 1. A Male in a stationary condition.

(b) CHILDREN 70.

(1) PULMONARY 40. Males 23 ; Females 17.

Of the males 15 are showing improvement, 4 are in a stationary condition and 4 have died.

Of the females 11 are doing well, 3 are stationary and 3 have died.

(2) NON-PULMONARY 30. Males 12 ; Females 18.

(a) Glandular 20. Males 7 ; Females 13.

Of the males 6 are doing well and 1 died after visiting the dispensary twice. Of the females 12 are showing marked improvement, and 1 developed acute tubercle of which she died. Five have required operative interference. Three of these were done by the Tuberculosis Officer, the other two receiving the necessary attention at the Royal Victoria Jubilee Infirmary.

(b) Peritoneal 3. All were in an advanced condition when first they visited the dispensary ; 2 died and one is now in a stationary condition.

(c) Inflammatory Eye Condition 1. A female making marked improvement.

(d) Skin 1. A male now in a stationary condition.

(e) Osseous 5. Male 1 ; Females 4.

The male patient improved whilst under treatment. Three of the females are doing well, whilst the fourth required operation and was admitted to the Royal Victoria Jubilee Infirmary for treatment.

A number of cases of surgical tuberculosis were treated at the Infirmary whilst negotiations were proceeding for arrangements of operative work, some of which found their way to the dispensary afterwards.

DOMICILIARY CASES.

There are so few domiciliary cases in the Borough that a few words only need be said in regard to them. 6 have been treated as such during 1914 and of these 3 are doing fairly well, 1 is stationary, and 2 have died. The small number of cases is probably due to want of application on the part of the insured person for sanatorium benefit, and has in some cases given rise to trouble regarding treatment, but this I hope to overcome early next year.

Ancillary treatment was granted to four persons.

REMARKS.

The scheme for tuberculosis in the County Borough of Tynemouth is almost complete and it is hoped that in the early part of 1915, the After-care Committee will have started work, and that arrangements with the Royal Victoria Jubilee Infirmary for operative work will be made and approved by the Local Government Board.

There is in my opinion a good chance of sufficient recovery in cases of tuberculosis in the early stage of the disease, to enable those suffering to return to work.

I feel pretty confident, where patients have being educated in the principles of hygiene to enable them to turn their homes into small sanatoria, the advanced stage of the disease will in many cases never be reached, but so long as cases in an advanced condition are sent back to live as they have done before, we are sowing the seed of the disease as fast as we are weeding it.

This of course occurs more especially in congested areas where the housing conditions are poor.

We have learned by experience how to eradicate tuberculosis and the question now really becomes one of a financial nature. If segregation of

advanced cases could be carried out not too far from the homes, it is possible that public prejudice would soon be overcome and the victims allowed to pass the remainder of their life in comparative comfort without endangering others.

It would be a great advantage were the sanatorium, in view, erected, as then the control would be entirely in the hands of the Corporation. and I feel convinced that sooner or later the law will be readjusted and that even the domiciliary cases will come under the direct treatment of the Tuberculosis Officer.

The necessity of a farm colony presents itself more forcibly as one advances from day to day in the treatment and after-care of the tuberculous subject.

It is most difficult to find suitable light employment for those returning from sanatorium, and indeed it would be a great advance in the right direction were a labour colony established where work could be found for those unfit to return to their old occupations and where they could learn some new and suitable trade.

I believe, were this attempted, it would not only revolutionize the work, but would hasten the stamping out of the disease.

In conclusion I would return to the Medical Officer of Health, the Assistant School Medical Officer and the Tuberculosis Nurse, my heartiest thanks for their ever willing and valuable co-operation. To the Committee also for their endeavour at all times to help in the carrying out of the work. To the practitioners I am indebted for their untiring zeal and co-operation in endeavouring to help in arranging the best form of treatment for those afflicted with tuberculosis.

III.

General Sanitation.

GENERAL SANITATION.

HOSPITALS.

MOOR PARK HOSPITAL.—The ordinary infectious diseases are treated and isolated at this hospital. One ward has been set apart for the treatment of advanced cases of pulmonary tuberculosis and two beds have also been provided in an adjacent building for observation cases. The latter, however, are used as ward beds for tuberculosis cases when not in use for patients under observation.

The number of cases admitted during the year was 389. At the beginning of 1914, 62 patients were in hospital, and during the year 389 were admitted, making a total of 451 under treatment. Of these 388 were discharged and 16 died, leaving 47 in the hospital at the end of the year.

Unfortunately a considerable amount of infectious disease occurred amongst the nursing staff, but all made a good recovery. The incidence was as follows :—scarlet 1 ; enteric and diphtheria, each 2 cases.

ADMISSIONS, DISCHARGES AND DEATHS, DURING 1914.

DISEASE.	Patients in Hospital, 1st January, 1914	Admitted.	Discharged.	Died.	Remaining in Hospital, 31st Dec., 1914.
Scarlet Fever...	53	262	273	2	40
Diphtheria ...	2	53	48	5	2
Enteric Fever...	1	48	40	6	3
Tuberculosis ...	6	26	27	3	2
Total...	62	389	388	16	47

The total number of days spent in hospital by patients during the year was 19,637, or an average duration of 50·4 days per patient.

The total number of days and the average duration of residence for each disease was as follows :—

	Scarlet Fever.	Diphtheria.	Enteric.	Tuberculosis
Total days in hospital ...	15007	809	1704	2117
Average number of days per patient	57·2	15·2	35·5	66·1

The vans for the removal of infected clothing and bedding and the return of disinfected articles made 521 journeys, and the number of days that the disinfectors was in use amounted to 196 days.

Owing to the number of cases being treated at the hospital during the year it was considered necessary to build a small annex at the north end of Pavilion II. This provides a separate entrance to the ward, a kitchen and linen cupboard and extra bed accommodation for the nursing staff. The annex is being erected during the current year.

Daily information is given in the local newspaper as to the progress of patients in hospital. When admitted a number is assigned to each case and this reference number is quoted in stating the patient's condition. I have to thank the proprietors of the "Shields Daily News" for their favour and courtesy in inserting each day the bulletin sent to them.

As observed in last year's report the Council had under consideration a scheme for the erection of a new infectious diseases hospital and a combined institution for the treatment of cases of tuberculosis at Balkwell. During the year the Borough Surveyor submitted plans showing three pavilions for infectious diseases, a sanatorium block for the reception of cases of tuberculosis and an administrative block from which both of the former institutions would be administered. The administration block, had moreover, been so devised as to allow of additions being made for meeting possible future requirements in the event of the ultimate extension of the infectious diseases hospital to accommodate 100 beds.

The Council approved of the plans and they have also been submitted to the Board for their observations.

During the month of November and after the outbreak of the war, when the Council had various financial considerations under review in respect of certain works which it was intended to do, it was decided to defer the scheme providing a new infectious diseases hospital and combined institution for cases of tuberculosis in the meantime.

Upon the outbreak of war, the Board's circular letters dated 12th and 31st August were received drawing the attention of Local Authorities to the importance of maintaining the Sanitary Service, making arrangements for carrying on the work of officers engaged in public health work if they should be called to give their services to the Navy and Army, and in co-operating generally with the Military Medical Authorities to

protect water supplies, secure satisfactory disposal of refuse, control infectious diseases and arrange for hospital accommodation for the ordinary infectious diseases and for smallpox.

About the same time inquiries were received from Headquarters of the Northern Command at York and from Medical Officers in charge of the Tyneside Defences, requesting information as to the number of beds available at the hospital in case of an outbreak of infectious disease amongst the troops.

The accommodation at Moor Park Hospital was only intended for the civil population in times of peace, yet the Health Committee were anxious to do all in their power to provide for the large number of troops which were suddenly brought into the district. The Chairman of the Committee convened a special meeting to consider the matter and it was agreed to take in cases free to the extent of the accommodation, but as the beds were almost fully occupied at the time, it was thought advisable to meet the Military Authorities and discuss the question more fully. Two interviews were arranged in Newcastle and the Chairman of the Health Committee suggested that further administration and ward accommodation should be provided, and if the Military Authorities bore the cost of any capital expenditure, the Local Authority would pay for the extra nursing staff and for the feeding of extra patients up to the number of 24 additional beds for ordinary infectious disease.

After consideration a reply was received from Headquarters, York, stating that arrangements had been made for the removal of infectious cases amongst the troops in the district to a Central hospital at Newcastle.

In compliance with a request from the Military Authorities large red letters are affixed to houses in which cases of infectious disease are being treated at home and soldiers are forbidden to have communication with such infected persons.

Each week a list of all cases of infectious disease is transmitted to the Military Sanitary Officer in order that he may be kept in touch with the incidence and location of such illnesses.

SMALLPOX HOSPITAL.—As noted in last year's report it was proposed to use the present hospital at Moor Park for smallpox owing to its isolated position and to build a new hospital for ordinary infectious diseases at Balkwell.

When war was declared the Board pointed out the need of having accommodation for smallpox, as under the circumstances an outbreak would be especially serious, and they urged all Sanitary Authorities to see that preparations for dealing with this disease were in working order for promptly controlling the first notified cases.

The Health Committee in view of the movement of military and refugees, and the facility with which disease might spread, recommended that a scheme be prepared and that the question be discussed with the Military Authorities. At a subsequent conference with the Military Authorities in Newcastle, when the provision of small pox accommodation was considered, it was pointed out that the Sanitary Authority had meantime no accommodation for the isolation of smallpox cases, but the Health Committee had suggested the erection of a temporary building and it was thought the Military Authorities might join with the Sanitary Authority in providing a small hospital to meet an emergency, should it arise, either in the civil population or amongst the troops.

Plans were prepared and submitted by the Borough Surveyor but the suggestion of a joint hospital did not mature.

It was then thought that some arrangement might be effected with a neighbouring Sanitary Authority in respect of the joint provision of temporary smallpox hospital accommodation, pending the erection of the new general infectious diseases hospital at Balkwell and Moor Park Hospital being released for smallpox cases. Joint sub-committees of both authorities visited the site of the proposed temporary hospital and also Moor Park Hospital, but at a subsequent meeting it was reported that the Hospital Committee of the neighbouring authority did not feel justified in recommending the authority to enter into the suggested arrangement with regard to the proposed provision of temporary buildings.

About the same time, in the month of November, the Finance Committee were reconsidering the advisability of proceeding with certain works in hand, and at a meeting of the Council, held on 25th November, it was resolved that amongst other works, the construction of a temporary smallpox hospital be deferred.

This leaves the question of provision for cases of smallpox in the same position as it was immediately after the old smallpox hospital was burned down and meantime there is no accommodation for such cases if an outbreak of the disease occurred.

BACTERIOLOGICAL LABORATORY.

During the year the number of specimens examined was 932.

The number of specimens examined since the laboratory was opened will be seen from the following table :—

YEAR.	Diphtheria.		Phthisis.		Typhoid Fever.		Ringworm.		Miscellaneous		Total.
	+	—	+	—	+	—	+	—	+	—	
1907	36	53	10	24	4	2	—	—	4	1	134
1908	44	74	3	16	7	5	—	—	—	2	151
1909	48	157	7	17	8	9	14	—	5	15	280
1910	80	201	24	46	4	17	169	32	7	10	590
1911	71	227	28	35	27	23	160	55	4	15	645
1912	78	169	48	75	6	25	106	38	24	2	571
1913	94	254	53	177	21	22	105	39	10	3	778
1914	122	367	61	225	53	77	12	7	5	3	932

The miscellaneous specimens were examined for the indentification of special organisms.

Milk specimens are examined for tubercle bacillus by animal inoculation at the laboratory of the University of Durham College of Medicine, Newcastle.

HOUSING.

Owing to the reports submitted to the Housing Sub-Committee pointing out the difficulty experienced by tenants in obtaining suitable housing accommodation a special report upon Housing Conditions in the Borough was prepared and considered at a meeting held on 23rd February. After consideration it was proposed that the Borough Surveyor be instructed to prepare a report relative to a proposal that surplus lands on the Balkwell Farm should be offered on lease in plots for building purposes in order to relieve the congestion in other parts of the Borough.

The matter was at once taken up by the Surveyor and reports submitted with plans showing a suggested “lay out” of a portion of the farm for building purposes.

Local Architects and Builders were also convened to discuss the building conditions and a Committee was appointed to deal with applications for sites. As local enterprise did not readily avail itself of the opportunity afforded, the matter was again reconsidered, and it was finally decided to

set apart 5 acres of the land at Balkwell for buildings to be erected by the Corporation. The Committee had also under consideration the advisability of acquiring an area of land at Prospect Terrace and George Street East. This land was subsequently purchased for the erection of dwelling houses by the Council at the east end of the town.

Following upon these decisions an exhaustive report upon the Prospect Terrace scheme was submitted by the Surveyor in July and a detailed report upon a municipal housing scheme at Balkwell in September.

The scheme at Prospect Terrace made provision for 15 houses, and the Balkwell scheme for 80 houses of different types, with sites reserved for shops. In the month of November the schemes with certain modifications were approved by the Council and it was then resolved that a commencement be at once made with the erection of houses at Prospect Terrace and with one-half of the number of houses in the Balkwell Estate, but that if a grant for housing be received from the Local Government Board the whole of the scheme should be proceeded with.

During the current year, however, in view of a letter dated 25th March received from the Local Government Board with regard to borrowing by Local Authorities and the decision of the Lords Commissioners of His Majesty's Treasury to restrict capital issues within the narrowest limits, and to economise labour by avoiding the inception of new works, the Council decided that the schemes for the present be deferred.

During the year the usual monthly meetings of the Housing Sub-Committee have been held to consider the reports of the Housing Inspector. Much useful work has been done and the following districts have been inspected and reported upon :—Stephenson Street, Norfolk Street, East Stephenson Street, Camden Street, Camden Lane, Union Street, Camden Terrace, Churchway, Cross Bedford Lane, Bedford Street, Little Bedford Street, Horsley's Cottages, Chirton, Collingwood Terrace, Chirton, Front Street, Chirton, Billy Mill Lane Chirton, Simpson Street, Chirton, Mill Street, Chirton, Chapel Street, Chirton, Back Street and Front Street, Preston.

The summary of houses dealt with, the nature of the defects, and the action taken will be found on pages 63-66.

Through the courtesy of the Borough Surveyor, I am enabled to give the actual number of new dwellings built during the year :—

NEW DWELLINGS ERECTED DURING THE YEAR 1914.

WARD	NUMBER OF ROOMS.						Totals.
	1	2	3	4	5	6 & over.	
Linskill	—	—	—	—	—	7	7
Milbourn	—	—	4	—	—	—	4
Total...	—	—	4	—	—	7	11

No new dwellings were erected in the other wards of the Borough during the year.

WATER SUPPLY.

The Borough derives its domestic water supply from the water works at Fontburn, Northumberland.

There are, however, about a dozen dwellings and outlying farms which are supplied by wells or springs and these are now being analysed to ascertain their purity or otherwise for domestic use.

The gravitation supply from the Font is distributed on the constant system. The gathering ground, as described in previous reports, is of a peaty character and the Water Committee are at present experimenting at the water works with two mechanical filters of different makers for the purpose of ascertaining the practical utility of laying down a complete installation of filters to decolorise the supply.

From tests made during the year there was no presumptive evidence of bacillus coli obtained by bacteriological examination. The colour of the water as tested by Hazen's colour standard was 8·5° due to the peaty soil from which it is obtained. Using 100 c.c. of water it required 1·3 c.c. of $\frac{N}{10}$ H₂SO₄ to neutralise the alkalinity using methyl orange as an indicator.

The water supply at Low Flatworth Farm was derived from a pipe which flowed into a duck pond in the farm yard. A sample was sent to the Public Analyst for analysis with the following result :—

	Grains per Gallon.
Total solid matters in solution dried at 212° F ...	71·260
Chlorine existing as Chlorides	5·356
Ammonia	0·002
Albuminoid Ammonia	0·008
Nitrogen existing as Nitrates	0·046
Oxygen Absorbed in 4 hours at 80° F	0·081
Lead and other poisonous metals	None.
Appearance in two foot tube	Faint yellow and slightly turbid.
Smell when heated to 100° F	Very faint earthy.
Microscopical examination of sediment	Satisfactory.

“ This is by no means a satisfactory water for use as a drinking water, although the results of the analysis do not show an excessive amount of nitrogenous organic matter in it, yet in all forms the amounts are fairly high when the very high dissolved mineral matter and chlorine are taken into consideration. We cannot definitely condemn the water, but we think it not very desirable, and it should certainly not be drunk without efficient previous subsidence or filtration.”

A gravitation supply has since been introduced to the farm.

The following places and premises have also been connected to the gravitation supply during the year :—

13, Spring Terrace ; East House, Linskill Terrace ; Victoria Houses, Northumberland Dock ; Tait's House, Howdon Dock ; and Hayhole Farm.

OFFENSIVE TRADES.

The following offensive trades are carried on within the Borough :—gutscraping 2 ; fish manure making 1 ; tripe boiling 4 ; tallow melting 1 ; dealing in rags, bones, fats, animal skins or other like matter in an offensive condition 3 ; fish and potato frying 18.

In the month of November an application was made for permission to use premises at Reed Street to carry on the trade of gutscraping. The application was not granted. Shortly afterwards it was discovered that the applicant was using premises for which no permission had been granted by the Sanitary Authority and proceedings in court were taken against the offender. The agent for the defendant however stated that his client expected to get permission to use premises for gutscraping elsewhere and the case was withdrawn on payment of costs by defendant.

SLAUGHTER HOUSES.—There is no public slaughter house in the Borough but the butchers in the town have formed a local association

and agreed to notify the Medical Officer of Health of any unsound food they may have upon their premises. There is also an arrangement whereby a butcher who is a member of the association will be compensated for meat condemned as unsound or unfit for human food.

The total amount of meat thus condemned during the year was 693 lbs.

There has of recent years been a continuous decrease in the amount of fresh meat killed in the town while frozen and chilled meat appears to be taking its place as an article of consumption.

An application by the Co-operative Society to use premises adjacent to their butcher's shop at Cullercoats for the purpose of slaughtering cattle was granted in the month of November.

INSPECTION OF DAIRY HERDS.

Mr. Harper, M.R.C.V.S., is Inspector under the Dairies, Cowsheds and Milkshops Order and also Inspector under the Tuberculosis Order, 1913. An arrangement has been made whereby he will inspect all bovine animals within the Borough quarterly. These inspections were carried out during the first half of the year in accordance with this arrangement. On 6th August notice was received from the Board of Agriculture that the operation of the Tuberculosis Order had been suspended, but the usual inspections under the Dairies, Cowsheds and Milkshops Order will be continued.

Under the Tuberculosis Order 1913, two cows were notified and dealt with under the Order.

One sample of milk was examined for tubercle by animal inoculation and the result proved to be positive.

MIDWIVES ACT, 1903.

At the end of the previous year there were 11 persons certified as midwives under the Act, practising or resident within the Borough. At the beginning of the year, one did not notify her intention of practising during the year, leaving 10 on the register during the year 1914.

The following is the revised list of persons certified as midwives and practising within the Borough, 2 being resident outside the Borough.

No. of certificate.	Name.	Address.
20153	Margaret Emmerson ...	8, Sibthorpe Street.
19570	Dorothy Hart ...	37, Stephenson Street.
18873	Violet Laidler ...	66, Stephenson Street.
30824	Elizabeth Preston ...	39, North Street.
150	Alice Scott ..	15, Linskill Street.
14146	Isabella Warren	11, Linskill Street.
24286	May Weston ...	3, Lovaine Row, Tynemouth.
31031	Ellen Young ...	28, Percy Street, Tynemouth.
7164	Hannah Piper ...	22, Denmark St., South Shields.
10670	Agnes Gallon ...	25, Nelson Street. Willington Quay.

The number of cases attended during the year by midwives was 722, or 41·6 per cent. of births registered during the year.

WORK OF MIDWIVES.

Year.	Midwives.	Cases attended.	Medical aid summoned.	Still born.	Miscarriages.
1909	10	441	22	13	14
1910	10	532	16	25	5
1911	10	550	21	24	9
1912	10	585	25	27	5
1913	11	651	8	29	10
1914	10	722	19	24	10

Medical aid was summoned for the following reasons :—Malpresentation and hæmorrhage, 3 ; Illness of mother, 6 ; Illness of child, 10.

During the year visits were frequently made for the purpose of inspecting the instruments and case books of each midwife.

The Act is intended to secure the better training of midwives and to regulate their practice. The Central Authority is the Central Midwives Board who have issued rules detailing the duties and responsibilities of all practising midwives.

The Town Council is the Local Supervising Authority and it is the duty of this Authority to exercise general supervision, investigate charges of malpractice, negligence or misconduct, and under certain circumstances order the suspension of any midwife from practice.

INFANT HYGIENE.

The notification of Births Act, 1907, has been adopted by the Council and with the sanction of the Local Government Board came into force on the 1st of May, 1912. The Act requires that notice in writing be sent to the Medical Officer of Health within 36 hours of the birth of a child, and applies to all births, whether the child be alive or not, if the pregnancy has lasted longer than 28 weeks.

During the first year after the adoption of the Act a Health Visitor was appointed to undertake the work under the Act and also the work in connection with Tuberculosis cases. On 1st July, 1913, a whole time Health Visitor, Miss Sweett, was appointed for the purpose of carrying out the duties under the Notification of Births Act.

In the month of December, 1914, Miss Sweett resigned the appointment to take up duties elsewhere and Miss Minto was afterwards appointed to take her place.

The total number of births notified during the year was 1789.

The persons notifying the births were :—

Doctor	...	...	...	617
Midwife	...	...	...	664
Others	...	...	...	508
Total				1789

According to the Ward in which they occurred the number of notified births was as follows :—

Ward.	Male.	Female.	Total.
Central ...	86	92	178
Collingwood...	112	112	224
Dockwray ...	136	133	269
Linskill ...	108	103	211
Milbourn ...	125	110	235
Percy ...	78	55	123
Preston ...	69	77	146
Rudyerd ...	90	83	173
Trinity ...	105	115	220
Total		880	1789

Of the 1,789 births 909 were males and 880 females. Fifty-two still births were notified.

As intimation of birth had not been duly given in many instances as required by the Act, a poster was displayed in various public places giving notice of the adoption of the Act and pointing out the necessity of notifying every birth occurring within the Borough within 36 hours under a penalty. 203 births were discovered during the year not to have been notified, but on writing to the parent it was usually found that the omission was due to ignorance.

Of this number 200 intimations were afterwards received from parents thus leaving only 3 cases which could not be traced, in all probability owing to removal, as the letters were returned undelivered.

The number of babies kept under observation was 1193, and the Health Visitor as far as possible made weekly visits during the first month, while selected cases were afterwards visited monthly until the completion of the first year of life. Altogether 3571 revisits were made.

Of the 1,193 cases visited, the births may be allocated, according to the size of house, as follows :—

One apartment	...	...	261 births.
Two apartments	...	...	511 „
Three apartments	...	...	269 „
Four apartments	...	...	120 „
Five apartments and over	...	...	32 „
			—
			1,193 births.

832 of the houses were found to be clean and 361 were dirty. The latter were specially kept under observation.

696 of the infants visited were insured.

With regard to breast feeding of 1,006 infants kept under observation the following table shows the periods during which they were entirely breast fed.

Period.	1 month.	3 months.	6 months.	9 months.	12 months.
Males ...	209	127	101	63	0
Females ...	213	140	98	54	1

The “ Guild for Mothers and Babies,” a voluntary institution, of which Mrs. Jos. Robinson is president, and which was inaugurated in May, 1913, has completed a very successful year’s work.

Dr. Amy Robinson has acted as Superintendent and, with the assistance of the Health Visitor and voluntary workers, directed the work at the two centres which were established, one at the east and the other at the west end of the town. I am also indebted to Dr. Robinson for the following particulars regarding the work of the Guild.

Altogether 49 meetings have been held at each centre and 159 mothers have made 950 attendances with their babies, an average of between 19 and 20 mothers attending each week.

The average attendance each quarter was as follows :—

First quarter	with an average attendance of	18
Second	„ „ „	17
Third	„ „ „	18·6
Fourth	„ „ „	22·8

Whenever practicable a short health talk was given to the parents.

The majority of the babies are breast fed but artificially fed babies are being brought in greater numbers for advice.

By co-operation with the Invalid Children's Aid Society some necessitous cases requiring extra nourishment are supplied with Virol, etc., at a nominal price when this is considered advisable.

About 20% of the children are over one year old.

As many expectant mothers as possible are invited to the Guild and advice given, and since the outbreak of war, at the request of the Maternity Sub-Committee of the Relief Committee, necessitous expectant and nursing mothers have been referred to the Guild to interview the Superintendent.

53 of these cases have been seen and wherever practicable the infants have been kept under observation.

During the year a circular letter from the Local Government Board dated 30th July was received, in which it was stated that an estimate had been laid before Parliament for a grant to be distributed by the Board in aid of the expenditure of Local Authorities and voluntary agencies in respect of institutions or other provision for Maternity and Child Welfare. The letter also stated that grants normally amounting to one-half of the approved expenditure would be given in respect of any work falling under the scope of the scheme, namely :—

1. Arrangements for the local supervision of Midwives.
2. Arrangements for :—

ANTE-NATAL.	{	<ol style="list-style-type: none"> 1.—An ante-natal Clinic for expectant mothers. 2.—The home visiting of expectant mothers. 3.—A maternity Hospital or beds at a Hospital, in which complicated cases of pregnancy can receive treatment.
-------------	---	---
3. Arrangements for :—

NATAL.	{	<ol style="list-style-type: none"> 1.—Such assistance as may be needed to ensure the mother having skilled and prompt attendance during confinement at home. 2.—The confinement of sick women, including women having contracted pelvis or suffering from any other condition involving danger to the mother or infant, at a Hospital.
--------	---	--
4. Arrangements for :—

POST-NATAL.	{	<ol style="list-style-type: none"> 1. The treatment in a Hospital of complications arising after parturition, whether in the mother or in the infant. 2. The provision of systematic advice and treatment for infants at a Baby Clinic or Infant Dispensary. 3.—The continuance of these Clinics and Dispensaries, so as to be available for children up to the age when they are entered on a school register, i.e. the register of a Public Elementary School, Nursery School, Creche, Day Nursery, School for Mothers or other school. 4.—The systematic home visitation of infants and children not on a school register as above defined.
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A scheme was suggested to the Committee whereby the work of the Guild for Mothers and Babies would be taken over and the work centralised by taking rooms adjoining the Health Office for conducting the work. This suggestion has been adopted and it is hoped that the work will make further progress during the current year.

CLEANSING DEPARTMENT.

The Superintendent, Mr. T. C. Storer, has control of this Department and with the assistance of Mr. R. H. Storer, is responsible for the organisation and practical working of the department.

The cleansing of the promenade, supervision of the sea banks, public shelters, and of the attendant of the life-boat for bathers also form part of the work of the superintendent during the summer months.

The work is divided into two sections, day and night scavenging. Part of the work is done by contract and part by Corporation Employees.

DAY SCAVENGING.—This work includes street cleansing, watering, flushing of sewers, cleansing of public urinals, removal of ashes, shop refuse, snow, and sanding the streets. There is also the supervision of the salt water pumping station and reservoir which is supplied by electrically driven pumps near the Low Lighthouse. This is utilised for the supply and cleansing of the Fish Quay, for

street cleansing, and also to fill the swimming bath at Hawkey's Lane, the Public Baths in Saville Street, and as a supply to many private dwellings.

The numbers of employees in the day section averaged about 50 men and 7 horses with cartmen.

The amount of refuse dealt with by day scavenging during the year was :—

Street sweepings	...	...	7730 loads.
Ashes and trade refuse	...	...	2064 „
Paper, rags, etc.	...	...	891 „
Road mud	...	...	178 „
			— „
Total			10863 loads.

The number of vans of water used for street watering was 3145 and for flushing sewers 1793. The amount of refuse delivered and consumed at the destructor amounted to 2456 loads.

NIGHT SCAVENGING.—The work of this section includes the emptying of all ashpits and sanitary pails and the carting of all household refuse to the manure depot or other tips.

Fifty-five men and 21 horses were employed on an average in this section, and the amount of refuse dealt with was :—

Removed to manure depot	...	19,341 loads.
„ „ farmers and others	12,410	„
„ „ destructor	830	„
		—
Total		32,581 loads.

The following table shows the number of ashpits, pails, etc., in the district :—

Emptied by	Privy Pails used as conveniences	Privy Ashpits.	Dry Ashbins, Pails, Boxes, &c.	Dry Ashpits.	Blood Kits.
Corporation ...	4063	365	238	94	60
Contractor ...	4854	127	828	27	20
Total ...	8917	492	1066	121	80

14 ashpits on the non-contracted area and 1 ashpit on the contract area have been abolished during the year.

The Borough in so far as removal of night soil is concerned is divided into two areas, viz. :—

(a) Contracted area comprising 11 districts. In 6 of these districts and in portions of other 2 districts the pails are emptied nightly with the exception of Saturday night. In the remaining districts pails are attended to on 4 nights in the week.

(b) Non-contracted area comprising 8 districts in which the pails are attended to nightly with the exception of Saturday.

A new contract was entered into on 1st April, for the removal of night soil on the contracted area.

At the end of the year 1914, 8,917 houses were provided with pails, there were 492 privy ashpits and about 3,659 houses were provided with water closets.

For some time past the question of the conversion of conservancy closets has been under consideration by the Health Committee and in the month of April the Council resolved that in exercise of powers contained in Secs. 39-42 of the Public Health Acts Amendment Act 1907, they undertake the systematic and general conversion of midden privies to the water carriage system in all cases where a sufficient sewer and water supply are available.

In the month of July intimation was given that the Local Government Board had sanctioned the borrowing of £2,000 for this purpose and instructions were then given that a scheme be submitted for consideration. Details of this scheme were in process of preparation when war was announced and the expenditure on this account has for the present been deferred.

The department has been extremely busy since August in attending to the refuse disposal from various military camps, billets, etc., in the occupation of the troops, involving a considerable amount of extra work upon the staff both of the Corporation and contractor.

METEOROLOGY.

The highest temperature during the year was 75°F in the month of August or 1° lower than the highest temperature of the previous year. The lowest temperature, 24° , was recorded in the month of January. The mean barometric pressure varied throughout the year from 29.084 inches of mercury recorded in the month of December to 30.080 inches in the month of September.

April was the driest month of the year with a total rainfall of 0.68" on 9 days, although September had only 8 wet days but a heavier rainfall than during the month of April.

The heaviest rainfall was recorded in the month of July with a fall of 3.90". The total rainfall for the year was 24.94 inches. Rain fell on 172 days during the year.

The average rainfall at Tynemouth during the last 10 years was as follows :—

Year	1905	1906	1907	1908	1909	1910	1911	1912	1913	1914
Inches	18.69	26.46	24.94	20.02	28.92	24.37	26.26	32.39	24.18	24.94
Average for 10 years 25.11"										

Details of the mean meteorological readings for the year 1914 as recorded by the Meteorological Office at Tynemouth were as follows :—

AVERAGE METEOROLOGICAL READINGS AT NORTH SHIELDS,

FOR THE YEAR ENDING 31st DECEMBER, 1914.

MONTH.	BAROMETER		TEMPERATURE OF AIR.						Prevailing Direction of Wind.	RAINFALL.	
	Mean Pressure in inches.	Mean of						Number of Days on which Rain has fallen.		Amount of Rainfall in inches.	
		Absolute Extremes.									
		8.0 a.m. Dry Bulb.	9.9 a.m. Wet Bulb.	Daily Max.	Daily Min.	Max.	Min.				
January	30.002	39.06	37.08	43.30	35.08	56	24	W. & W.N.W.	20	1.80	
February	29.459	42.19	40.27	46.11	39.19	56	31	S.W. & S.S.W.	15	0.98	
March...	29.496	38.03	37.22	47.10	34.28	59	28	W.S.W. & W.N.W.	24	2.39	
April ...	29.932	44.01	41.26	55.29	40.29	64	34	S.W. & S.S.W.	9	0.68	
May ...	30.062	48.16	48.22	56.16	44.05	71	33	W.S.W. & S.W.	14	1.44	
June ...	30.031	53.01	50.16	61.27	47.25	70	41	N. & S.W.	13	3.20	
July ..	29.892	56.55	54.42	63.48	53.22	72	48	N.W. & S.E.	10	3.90	
August	30.031	56.45	54.32	64.93	53.00	75	49	S.W. & S.E.	13	2.04	
September	30.080	51.00	49.00	61.17	47.66	71	37	N.W. & S.W.	8	1.87	
October	30.063	48.77	47.71	55.10	46.10	65	38	N.W. & N.E.	12	1.35	
November	29.781	44.80	42.93	50.57	40.33	58	31	N.W. & S.W.	15	2.37	
December	29.084	40.42	37.29	44.40	36.97	51	28	S.W. & S.S.W.	20	2.92	
								Total	172	24.94	

PUBLIC HEALTH OFFICE,

TYNEMOUTH.

ANNUAL REPORT OF THE CHIEF SANITARY INSPECTOR.

MR. MAYOR, MADAM AND GENTLEMEN,

I beg to submit my ninth Annual Report, with tables, showing the work done in the department during the year ending 31st December, 1914.

INSPECTIONS :—During the year periodical inspections have been made of the various districts including the Allotments, Middle Engine, Murton Row, Blue Houses, Flatworth, etc.

All houses where infectious diseases had been notified, were visited and inquiries made respecting the source of infection, and the nature and condition of the sanitary arrangements was inspected. Arrangements were also made in each case for the removal of the patient to hospital or isolation at home, and for the disinfection of bedding, clothing and the fumigation of rooms.

Visits have also been made to the premises in connection with complaints as to nuisances, etc., which in some cases were verified while in others no cause for complaint was found.

Frequent inspections were made of all factories, workshops, work places and outworkers (as per table) which were from time to time notified by H.M. Inspector of Factories. Defects or nuisances notified are enquired into and reported to the Council, and followed by a notice for the necessary work to be carried out.

Inspections were also made of butchers' shops slaughter houses, premises where offensive trades are carried on, dairies, milkshops, farms, common and seamen's lodging houses.

NUISANCES.—During the year the number of notices served for the abatement of nuisances under the Public Health Acts and Local Bye-laws was 894 of which 862 were informal or preliminary and 32 statu-

tory notices, the informal notice being sufficient in many cases. Other work was carried out willingly by owners after an interview or after inspection of the premises with the owner or agent, without serving a notice. The nuisances and defects found varied in character.

SANITARY CONVENIENCIES.—In addition to the provision of water-closets and ashbins for all new buildings, several additional water-closets have been erected to existing premises, and also in the place of privy middens and privy pail closets, as follows :—

15 Privy middens and 13 W.C.s erected in their places.

6 Privy pail closets converted to 7 W.C.s.

23 Additional W.C's erected to premises where the accommodation was considered insufficient.

OFFENSIVE TRADES.—There are at present 29 separate trades established within the Borough which come under the above heading. All premises are frequently inspected and a great improvement has taken place in the carrying on of the trade of gutscraping. The provision of galvanized iron bins, with tight fitting covers, for the collection of material and deposit of refuse is now required.

Much improvement has also been made in fish frying premises by the construction of closed in stoves.

The following is a list of the various trades :—

Gutscraping	2	Fish Guano Works	1
Fish Frying	18	Tallow Melter	1
Tripe preparing	4	Marine Store Dealer	3

DRAIN TESTING.—The drains and sanitary fittings of 545 houses were inspected either on receipt of complaint, by request, or following a case of infectious disease.

The drains of 13 dwelling houses were tested by request, and 7 after being inspected on suspicion of causing a nuisance or after receiving complaint of a nuisance from the tenant, making a total of 20 tests, all of which revealed defects. All defective drains were either relaid or put in a sanitary condition by the owners after receiving a report of the test, and all repairs or alterations were supervised by an inspector.

HOUSE TO HOUSE INSPECTION.—The house-to-house inspection under the Housing Town Planning, etc., Act, 1909, has been continued. 982 tenements were inspected during the year. Full reports of houses inspected and defects found were submitted to the Housing Committee each month. The inspection included all tenements and some self-contained houses and cottages in the various streets as given on pages 63-66. Cases of over-crowding were still found during the inspection, some large families only occupying one room, but usually after some considerable difficulty the overcrowding was abated by the occupants finding more suitable accommodation.

In regard to overcrowding I do not think there will be much improvement owing to the lack of houses of all sizes, especially one, two and three roomed dwellings, unless steps are taken to provide suitable houses for the working classes at a moderate rental.

The principle defects found during the inspection were defective roofs, spouting, broken surfaces of yards, insanitary privies, defective drainage, and dampness. A number of rooms were found to have damp and defective walls, ceilings and floors. In a great number of cases either one-half or the whole of the window would not open. In each instance however notice was served requiring the owner to construct the windows so that they would open top and bottom for ventilation. A large quantity of refuse has also been removed from attics, cellars, outhouses, yards, etc.

The following table shows the number of dwelling houses which have been dealt with during the year:—

Tenements inspected	982
Tenements considered unfit for human habitation ...	6
Representations made to Local Authority with a view to making of Closing Orders	6
Closing Orders made	3
Tenements, the defects in which were remedied without making of Closing Orders	261
Dwelling houses which, after the making of Closing Orders, were put in a fit state for human habitation	—
Houses closed voluntarily by owner	12
Houses demolished voluntarily by owner	11
Houses demolished by Order	2

On pages 63-66 will be found a list of houses where defects were found and the action taken thereon.

SEAMEN AND COMMON LODGING HOUSES.—There were 29 seamen's and 8 common lodging houses on the register on the 31st December, 1914, providing accommodation for 392 and 304 lodgers respectively. All the houses were regularly inspected during the year and usually found in a satisfactory state, so far as cleanliness, management and carrying out of the bye-laws generally was concerned. The limewashing of room walls and ceilings, and also staircases, passages and outhouses connected with the houses was done twice during the year. There is a decrease of 4 seamen's lodging houses and the number of common lodging houses remains the same as the previous year.

FACTORIES AND WORKSHOPS.—The number of factories and workshops on the register at the end of the year was 217 (as per table), which includes 14 bakehouses and 3 laundries, all of which have been inspected frequently, and with few exceptions the requirements of the Acts as to cleanliness, ventilation, air-space, sanitary conveniences (for both sexes where necessary), etc., were complied with, only in a very few cases was it necessary to serve notices.

The number of outworkers on the register was 16 being a decrease of 4 compared with the previous year. The homes of outworkers were visited at least twice during the year and found satisfactory.

DAIRIES, DAIRY FARMS AND MILKSHOPS.—There are 22 dairy farms or cowkeepers within the Borough, being an increase of 1 compared with the previous year. The total number of cows kept at the last inspection of the year was 254 being an increase of 13. The number of cows varied from 1 to 27. The number of persons registered to sell milk including shops, dairies and farms, is 209. All premises registered to sell milk were inspected at least twice during the year, including the dairy farms, and in most cases there was no cause for complaint. In 3 cases a notice was sent respecting the limewashing of cow byres. When visiting the farms I was accompanied by the Veterinary Surgeon who inspected all the cows.

BUTCHERS' SHOPS AND SLAUGHTER HOUSES.—During the year frequent inspections were made of these premises while slaughtering was being done and also at other times, but no cause for complaint was found. There are 25 who slaughter in their shops and 26 who have separate slaughter houses. 18 retailers not included in the fore-

going numbers deal in frozen or chilled meat only. There was a slight increase in the number of cattle slaughtered as compared with the previous year owing to the decrease in the import of frozen and chilled meat since the war began.

INSPECTION OF FISH AND FISH CURING PREMISES.—Frequent inspection of fish landed by boat at the Fish Market was made, as well as of consignments arriving by rail from various ports. The quantity of fish condemned during the year was less than in the previous year, which was no doubt owing to the total quantity of fish received being much less than usual.

All condemned fish is immediately sent to the Fish Guano Works at the Low Lights. The fish curing and smoking premises are regularly inspected while the trade is in progress, but no cause for complaint in respect to nuisances was found, the premises being thoroughly cleansed daily and limewashed regularly,

SAMPLES OF FOODS AND DRUGS.—The number of samples purchased for analysis during the year was 187, of which 115 were “Formal” and 72 “Informal” samples taken under the Sale of Food and Drugs Acts. Of these 1 was the subject of legal proceedings, the result of which will be found in the table. There was also 5 samples of milk certified by the Public Analyst to be below the standard but the deficiency was considered not to be sufficient to warrant proceedings being taken. In each case the person responsible was either brought before the Health Committee to explain the deficiency or a letter of caution was sent by the Town Clerk.

INFECTIOUS DISEASE.—All cases of infectious disease notified during the year were visited by the Inspectors for the purpose of making necessary enquiries. The patient was removed to the isolation hospital when it was considered necessary. After removal of the patient or at the termination of illness, if the patient was kept at home, the infected rooms were fumigated and the bedding and clothing removed to the disinfecting stove at the hospital. A total of 623 rooms and 4403 articles were disinfected during the year.

I am, Madam and Gentlemen,

Your obedient servant,

GIBSON EDWARDS,

Inspector of Nuisances.

Inspections under Housing Town Planning, etc., Act, 1909.

Situation of Premises.	No. of Dwellings where defects were found.	Nature of Defects Found.	Action taken.
Stephenson Street	72	Defective floors, windows, roofs, spouting, privies, passages, staircases, fireplaces, surfaces of yards, walls, ceilings, doors and chimneys. Damp rooms. Accumulations of refuse. Delapidated outhouses. Insufficient ventilation. Filthy staircases and passages. Insufficient sanitary accommodation. Dangerous open staircases. Dark passages and staircases.	Notices served, defects remedied, refuse removed, additional sanitary accommodation provided, and passages and staircases limewashed or coloured.
do.	6	Overcrowded	Abated.
Norfolk Street	8	Defective floors, walls, windows, ceilings of rooms, spouting, chimneys, roofs, doors, surfaces of yards, and privies. Dirty passages and staircases. Accumulations of refuse. Dirty rooms. Insufficient sanitary accommodation.	Notices served, defects remedied, staircases and passages coloured, pavement of yards repaired, refuse removed and sanitary accommodation arranged.
East Stephenson Street	1	Defective roof, spouting, floor and surface of yard. Damp rooms	Notice served, defective roof, spouting, floors of rooms and pavement of yard repaired, and measures taken to prevent dampness.
Dissington Terrace	3	Defective roof, stairs, floors, spouting and outhouses. Damp walls of rooms.	Notices served, defects and dampness remedied.
Howard Terrace	1	Defective ceilings, windows, walls, passage and chimney. Insufficient sanitary accommodation.	Notice served, defects remedied, sanitary accommodation being provided.
Camden Lane	21	Defective windows, spouting, privies, staircases and passages, roofs, floors, walls, doors, ceilings and pavements of yards. Dirty passages and staircases. Damp rooms. Unsuitable pail closet.	Notices served, defects remedied, additional ventilation provided, pavements of yards repaired.

Situation of Premises.	No. of Dwellings where defects were found.	Nature of Defects Found.	Action Taken.
Camden Street	2	Defective windows, roofs and pavements of yards. Damp rooms. Defective and dirty passages and staircases. Smoky chimney. Accumulations of refuse.	Notices served, defects remedied, yards cemented, refuse removed and dampness prevented.
Union Street	1	Defective roof, window, spouting, privy, outhouses and surface of yard. Dirty staircase	Notice served, defects remedied and staircase coloured.
Cross Camden Lane	3	Defective walls, spouting, floors, roofs, privies, windows, and ceilings. Dirty and defective passages and staircases.	Notices served, defects remedied, passages and staircases coloured.
Beall's Court... ..	1	Defective spouting, windows, and pavement of yard. Damp walls and dirty staircase.	Notice served, defects remedied, and staircase coloured.
Camden Lane	1	Overcrowded	Abated.
Camden Terrace	6	Defective walls, windows, staircases and passages, spouting, privies, floors, ceilings, roofs and doors. Damp rooms. Dirty staircase.	Notices served, defects and dampness remedied, and staircase coloured
Churchway	38	Defective doors, floors, ceilings, walls, windows, privies, fireplaces, roofs, spouting, pavement of yards and outhouses. Defective w.c.'s and cisterns. Dirty and defective passages and staircases. Accumulations of refuse. Smoky chimneys. Dirty rooms. Insufficient privy accommodation. Badly lighted bedrooms and staircases. Damp walls. Badly lighted and ventilated w.c.'s.	Notices served, defects remedied, refuse removed, passages and staircases coloured, yards cemented, and additional sanitary accommodation provided.
Wellington Street	1	Defective walls, windows, staircase and ceilings	Notice served and defects remedied.
Cross Bedford Lane	7	Defective main roof, spouting, windows, ceilings and floors. Defective and dirty staircase. Damp walls. Insufficient sanitary accommodation.	Notices served, defects remedied, dampness prevented, staircase coloured, additional privy accommodation being provided.

Situation of Premises.	No. of Dwellings where defects were found.	Nature of Defects Found.	Action Taken.
Bedford Street ...	12	Defective floors, walls, ceilings, windows of rooms, privies, roofs, spouting, w.c., basin, and surfaces of yards. Damp walls. Defective and dirty passages and staircases.	Notices served, defects remedied, passages and staircases remedied, and w.c. basin renewed.
Waterloo Terrace ...	2	Defective floors, passage, roof, windows and privies ...	Notices served and defects remedied.
Back Saville Street ...	1	Defective privies...	Notice served and defect remedied.
Little Bedford Street ...	15	Defective spouting, privies, windows, main roof and surfaces of yards. Dirty and defective staircases and passages. Insufficient sanitary accommodation.	Notices served, defects remedied, passages and staircases limewashed, and additional w.c.s provided.
Albion Terrace ...	3	Defective floors, windows, ceilings and stairs ...	Notices served and defects remedied.
Russell Street ...	1	Defective passage, pavement of yard and privy. Accumulation of refuse	Notice served, defects remedied and refuse removed.
Horsley's Cottages ...	14	Defective roofs, windows and floors. Damp rooms. No receptacles for refuse.	Notices served, defects remedied, additional ventilation and extra dustbins provided
Collingwood Terrace, Chirton ...	18	Defective floors, spouting, passages walls, privies, ceilings, roofs, windows and scullery sink waste pipes. Obstructed spouting. Nuisance from fowls. Dirty and defective passages and staircases.	Notices served, defects remedied, fowls removed and passages and staircases coloured.
Front Street, Chirton ...	14	Defective w.c. basins, ceilings, walls, floors, windows. surfaces of yards, spouting, privies, roofs, gullies and chimneys. Obstructed spouting. Dirty and defective staircases and passages.	Notices served, defects remedied, w.c. basins renewed, staircases and passages limewashed or coloured, gully removed.

Situation of Premises.	No. of Dwellings where defects were found.	Nature of Defects Found.	Action Taken.
Billy Mill Lane, Chirton	19	Defective and dirty passages and staircases. Defective surfaces of yards, privies, walls, ceilings, floors, roofs, chimneys, fireplaces, windows and spouting. Damp rooms. Accumulation of refuse.	Notices served, defects remedied, refuse removed, passages and staircases coloured or limewashed and dampness remedied.
Simpson Street, Chirton	27	Defective floors, walls, ceilings, windows, spouting, roofs, surfaces of yards, doors, fireplaces, privies, outhouses. Obstructed spouting. No water supply. Dangerous staircases. Obstructed and defective drains. Damp rooms. Defective and dirty passages and staircases.	Notices served, defects and dampness remedied, refuse removed, spouting cleansed, drains cleared and repaired, water supply provided.
Mill Street, Chirton	8	Defective gullies, pavements of yards, privies and roofs. Damp rooms.	Notices served and defects and dampness remedied.
Heaton Terrace, Chirton	3	Defective walls, fireplaces and privies	Notices served and defects remedied.
Chapel Street, Chirton	5	Defective walls, fireplaces and privies. Dirty staircases.	Notices served, defects remedied and staircases coloured.
Back Street, Preston	27	Defective spouting, gullies, roofs, floors, walls, windows ceilings, doors, privies, fireplaces, passages and staircases, surfaces of yards. Damp rooms. Insufficient privy accommodation.	Notices served, part defects remedied and others in hand, additional sanitary accommodation being provided.
Front Street, Preston	3	Defective roofs, privies, stairs, outhouses, floors, ceilings and spouting	Notices served and defects partly remedied, others receiving attention.

Factories, Workshops, Workplaces and Homework.

I.—*Inspection* (Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.)

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions.
Factories (Including Factory Laundries) ...	44	3	
Workshops (Including Workshop Laundries)	323	12	
Workplaces (Other than Outworkers' premises included in Part 3 of this Report)... ..	Nil.	Nil.	
Total...	367	15	

2.—*Defects Found.*

Particulars.	Number of Defects.			Number of Prosecut'ns
	Found.	Remedied.	Referred to H M. Inspector.	
<i>Nuisances under the Public Health Acts :—</i>				
Want of Cleanliness	9	8		
Want of Ventilation	1	1		
Overcrowding	—	—		
Sanitary Accommodation {	insufficient	1		
	unsuitable or defective	2		
	not separate for sexes	2		
Other Matters	—	—		
Total...	15	14		

3.—*Home Work.*

Outworkers' Lists, Section 107.				
Lists received from Employers sending twice in the year—				
Wearing Apparel—[1] Making, &c. ...	Lists	12	19 names.	
Wool workers	"	4	4 "	
Lists received from Employers sending once in the year—				
Wearing Apparel—[1] Making, &c. ...	Lists	1	1 "	
Shoemaker	"	—	— "	
Furniture and Upholstery	"	—	— "	

*24 names.

* 8 of these names appeared on two lists, therefore making the total number of individuals employed as outworkers 16.

As no lists had been received, letters, requesting that the return of outworkers be sent in at once, were sent to the various firms in the Borough, but in the majority of cases replies were received stating that they employed no outworkers and did not think any return should be made.

4.—Registered Workshops.

Workshops on the Register (s. 131) at the end of the year. (1).				Number. (2).
Important classes of workshops, such as workshop bakehouses may be enumerated here.	The most important Workshops are :—			
	Bakers	...	...	14
	Engineers...	...	...	11
	Fish Curers	...	...	34
	Joiners	...	...	20
	Milliners	...	...	10
	Shoemakers	...	...	14
	Tailors	...	...	19
	Other Trades	...	...	95
Total number of Workshops on Register				217

5.—Other Matters.

Class (1).	Number (2).
Matters notified to H.M. Inspector of Factories :—	
Action taken in matters referred by H.M. Inspectors as remedial under the Public Health Acts, but not under the Factory Act (S. 5) {	Notified by H.M. Inspector Reports (of action taken) sent to H.M. Inspectors
	15
	15
Underground Bakehouses (S. 101) :—	
In use at the end of the year...	None.

List of Workshops on the Register at the end of the year.

Basket Makers	...	1	Dyers	...	...	1	Photographers	...	5
Bakers	...	14	Engineers	...	...	11	Picture Framer	...	1
Boiler Makers...	...	1	Farriers	...	...	3	Perfumers	...	1
Boat Builders	...	1	Fish Curers	...	...	34	Plumbers	...	5
Bicycle Repairers	...	2	Gas Manufacturers	...	...	1	Printers	...	6
Biscuit Manufacturers	...	1	Hosiers...	...	...	2	Rag Sorters	...	2
Blacksmiths	...	4	Ice Manufacturers	...	...	2	Saddlers	...	1
Block & Mast Makers..	...	1	Jewellers	...	...	6	Sail Makers	...	1
Brewers	...	1	Joiners	...	...	20	Salt Packers	...	2
Brick Makers	...	1	Laundries	...	...	3	Sausage Makers	...	1
Cabinetmakers	...	2	Lead Manufacturers	...	...	1	Shoemakers	...	14
Cartwrights	...	1	Metal Founders	...	...	3	Tailors	...	19
Coffee Grinders	...	2	Milliners	...	...	10	Timber Merchants	...	5
Coach Builders	...	3	Mineral Water Makers	...	...	3	Tinsmiths	...	2
Compass Adjusters	...	1	Net Makers	...	...	3	Upholsterers	...	1
Confectioners	...	1	Oil and Guano	...	...		Waggoners	...	1
Dressmakers	...	7	Manufacturers	...	...	1			
Drysalters	...	1	Paint Manufacturers...	...	...	1	Total	...	217

ANALYSIS OF FOOD AND DRUGS.

Articles Analysed.	Number Analysed.	Result of Analysis		Extent of Adulteration.	Action Taken.
		Genu.	Adul.		
FORMAL SAMPLES.					
Milk ...	104	98	6	7.0 % deficient in non-fatty solids ... 5.0 % deficient in milk fat ... 11.6 % deficient in milk fat, and 6.2 % deficient in } non-fatty solids ... 3.3 % deficient in milk fat ... 3.9 % deficient in non-fatty solids ... 7.0 % do. ...	Cautioned. do. Case di-missed. Cautioned. do. do.
Whisky	1	0	1	27.0° under proof ...	do.
Lard ...	1	1	0		
Cream ...	9	8	1	(***)... ..	do.
INFORMAL SAMPLES.					
Whisky	12	11	1	27.9° under proof ...	Followed up by formal sample.
Lard ...	24	24	0		
Butter ...	24	24	0		
Cheese ...	12	12	0		
TOTALS	187	178	9		

(***) See paragraph 4 of following page.

REPORT OF ADMINISTRATION IN CONNECTION WITH THE PUBLIC HEALTH (MILK AND CREAM) REGULATIONS, 1912.

1. MILK AND CREAM NOT SOLD AS PRESERVED CREAM.

	Number of samples examined for the presence of a preservative.	Number in which a preservative was reported to be present.
MILK ...	104	Nil.
CREAM ...	1	1

2. CREAM SOLD AS PRESERVED CREAM.

(a) Instances in which samples have been submitted for analysis to ascertain if the statements on the label as to the preservatives were correct.

(1) Correct statements made	...	...	...	...	8
(2) Statement incorrect	...	...	...	...	0
				Total	8

(b) Determinations made of fat in cream sold as preserved cream.

(1) Above 35 per cent.	...	...	..	...	8
(2) Below 35 per cent.	...	...	...	...	0
					8

(c) Instances where (apart from analysis) the requirements as to labelling or declaration of preserved cream, in Article V (1) and the proviso in Article V (2) of the Regulations have not been observed ... Nil.

(d) Particulars of each case in which the Regulations have not been complied with, and action taken ... Nil.

3. THICKENING SUBSTANCES.

Any evidence of their addition to cream or to preserved cream.

Action taken where found ... Nil.

4. OTHER OBSERVATIONS (IF ANY).

The sample of cream under heading (1) although sold as cream was really a sample of preserved cream, and was sold by a young girl through a misunderstanding from a jar of preserved cream. This was subsequently explained to the Inspector by the proprietor and before receiving the certificate of the analyst. The proprietor was under the circumstances cautioned.

DISINFECTION OF HOUSES, Etc.

Cause.					Rooms.	Articles.
Scarlet Fever	...	...	...	...	341	3059
Diphtheria	...	...	...	...	96	683
Typhoid	..	...	...	...	62	364
Tuberculosis	...	...	...	...	58	234
Vermin ...	...	...	...	...	50	43
Puerperal	...	...	...	...	3	0
Acute Poliomyelitis	...	...	...	...	1	0
Other Diseases	...	...	...	..	12	20
					<hr/>	<hr/>
					623	4403

SANITARY PAIL SYSTEM.

Notices served on account of defective sanitary pails, doors, etc.

(including repeated notices) 2906

Notices complied with during the year 1967

(Percentage of notices complied with—67·6 per cent.)

Statutory notices served for new sanitary pails 111

Statutory notices complied with during the year 110

93 additional water closets were provided during the year
15 ashpits have been abolished during the year.

A Summary of Nuisances dealt with by Notice under the Public Health Acts and Bye-laws.

NATURE OF NUISANCE DEALT WITH AND WORK REQUIRED TO BE DONE.

List of defects found during routine inspections and inspections under the
Housing, Town Planning, etc., Act.

NUISANCES.	Public Health Act.		Housing, Town Plan- ning, etc., Act.	
	Informal.	Statutory.	Informal.	Statutory.
Obstructed & Defective Drains & Gullies ...	141	7	5	...
Defective Ashpits to be repaired ...	7	...	...	...
„ Ashpits to be converted to W.C's ...	...	...	1	...
„ Privies and Outhouses ...	144	5	110	...
„ W.C. Cistern, Pipes, etc, ...	16	...	4	...
„ and Obs. Spouting, Eaves, etc. ...	39	1	135	...
„ Walls, Floors and Ceilings of ro'ns ...	52	2	203	...
Dirty Yards, Privies, etc. ...	140	...	...	...
Defective Surfaces of Yards ...	13	1	58	...
No Water Supply ...	3	...	1	...
Cleanse Dirty Rooms ...	23	1	4	...
Additional W.C.s. required ...	...	9	7	7
Untrapped Scullery Sinks ...	6	...	...	...
Defective and Obstructed Scullery Sinks ...	3	...	2	...
Dirty and Defective Washhouses ...	8	...	...	...
Accumulated Manure or Refuse ...	36	2	24	...
Defective Chimneys and Fireplaces ...	5	...	24	...
Defective Roof of Building ...	35	2	83	...
Provide Urine Guards ...	45	...	...	...
Damp Rooms, etc. ...	22	1	39	...
Defective Doors	3	...	17	...
Dirty Passages and Staircases ...	43	...	42	...
Insufficient Light and Ventilation ...	4	...	16	...
Defective Windows ...	18	...	97	...
Obstructed W.C.s. ...	24	...	...	...
Provide System of Drainage ...	...	...	...	...
Overcrowding ...	2	...	6	...
Provide Dustbins ...	2	...	4	...
Fowls, etc. ...	5	...	1	...
Defective Staircases and Passages... ..	19	1	85	...
Defective Underground Tanks ...	4	...	...	...
	862	32	968	7

TABLE I.
Vital Statistics of Whole District during 1914 and previous Years.

YEAR.	Population estimated to middle of each Year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS.		NETT DEATHS BELONGING TO THE DISTRICT.			
		Un-correct'd Number.	Nett.		Number.	Rate.	of Non residents regist'r'd in the District.	of Residents not regist'r'd in the District.	Under 1 Year of Age.		At all Ages.	
			Number.	Rate.					Number.	Rate per 1,000 Nett Births.		
												Number.	Rate.	Number.	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13
1908	56654	1896	...	33.4	1037	18.3	85	1	262	138	951	16.8
1909	57428	1874	...	32.6	1018	17.5	63	3	239	127	958	16.7
1910	58223	1788	...	30.7	1035	17.7	66	2	224	125	971	16.6
1911	59008	1672	1653	28.0	963	16.4	74	38	204	123	927	15.7
1912	59809	1752	1734	28.9	1001	16.7	83	39	177	102	957	16.0
1913	60601	1766	1748	28.8	974	16.7	76	53	215	123	951	15.6
1914	60688	1753	1736	28.6	1038	17.1	93	47	230	132	992	16.3

Area of District in acres (exclusive of area covered by water), 4,288.

Total population at all ages, 58,816.	}	At Census of 1911.
Number of inhabited houses, 12,783.		
Average number of persons per family, 4.5.		

TABLE II.—Cases of Infectious Disease notified during the Year 1914.

NOTIFIABLE DISEASE.	NUMBER OF CASES NOTIFIED.						TOTAL CASES NOTIFIED IN EACH WARD.									TOTAL CASES REMOVED TO HOSPITAL.		
	At all Ages.	At Ages—Years.						1	2	3	4	5	6	7	8		9	
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 45.	45 to 65.											65 and upwards.
Small-pox
Cholera (C) Plague (P)
Diphtheria (including Membranous Croup)	92	34	40	10	5	2	...	2	9	15	23	4	6	10	6	17	53	
Erysipelas	59	1	2	3	21	23	8	...	5	10	...	4	1	10	10	9	...	
Scarlet Fever	373	85	267	14	4	...	...	...	49	36	51	33	32	74	28	52	262
Typhus Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Enteric Fever	57	3	19	15	19	1	...	...	15	14	6	4	3	4	4	...	48
Relapsing Fever (R)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Continued Fever (C)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal Fever	2	...	...	...	2	...	...	...	...	...	...	1	...	...	1	...	...
Cerebro-Spinal Meningitis	2	2	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...
Poliomyelitis	1	1	...	...	...	...	...	...	1	4	1	3	...	...	1	...	...
Ophthalmia Neonatorum	12	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...
Pulmonary Tuberculosis	124	1	15	31	55	19	1	...	14	15	9	17	9	9	15	16	54	
Other forms of Tuberculosis	76	3	32	12	4	...	...	...	3	12	9	9	1	8	17	8	...
Totals	798	22	153	375	85	110	45	9	98	106	106	75	52	116	83	106	417*	

* Moor Park Hospital (Infectious)

do. (Tuberculosis)

Stannington Sanatorium

Woodburn do.

...

...

...

...

363 cases.

26

4

24

...

...

...

...

56

...

...

...

Number of Infectious Diseases that can be concurrently treated 3

Isolation Hospital—Moor Park Hospital, near North Shields.

Sanatoria—Stannington Sanatorium, Northumberland ;

Woodburn Sanatorium, Edinburgh.

TABLE III.

Causes of, and Age at Death during the Year 1914.

Causes of Death.	Nett Deaths at the Subjoined ages of "Residents" whether occurring within or without the District.									Total Deaths whether of "Residents" or "Non- Residents" in Institutions in the District.
	All Ages	Under 1 year	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and upwards.	
1	2	3	4	5	6	7	8	9	10	11
All Causes } Certified ...	961	217	80	50	41	44	121	199	209	...
} Uncertified ...	31	13	1	...	1	...	...	7	9	...
Enteric Fever ...	7	...	...	1	...	2	4	..	...	7
Small Pox ...	...	...	...	...	..	..	...	...	...	...
Measles ...	9	2	5	2	...	...	...	...	...	...
Scarlet Fever ...	5	..	1	1	3	..	...	...	...	2
Whooping Cough ...	10	2	6	2	...	...	...	...	...	1
Diphtheria and Croup ...	12	1	4	5	2	...	...	...	...	5
Influenza ...	5	...	...	...	...	1	...	3	1	...
Erysipelas ...	3	1	...	1	..	...	...	...	1	1
Phthisis (Pulmonary Tuberculosis) ...	75	1	2	...	6	14	40	12	...	25
Tuberculous Meningitis ...	15	4	5	3	3	...	...	...	...	2
Other Tuberculous Diseases ...	24	1	7	6	3	3	1	2	1	3
Cancer, malignant disease ...	50	...	...	..	1	...	11	26	12	13
Rheumatic Fever ...	4	...	...	...	1	1	1	...	1	...
Meningitis ...	11	2	3	4	2	...	...	...	...	...
Organic Heart Disease ...	79	1	...	..	2	3	6	36	31	19
Bronchitis ...	81	25	6	3	..	...	3	21	23	11
Pneumonia (all forms) ...	95	22	18	5	7	7	12	12	12	14
Other diseases of Respiratory organs ...	8	1	1	1	1	...	...	2	2	1
Diarrhoea and Enteritis ..	61	40	12	6	...	...	...	3	...	2
Appendicitis and Typhlitis ...	4	...	...	...	...	2	...	2	...	2
Cirrhosis of Liver ...	8	...	...	...	...	...	2	5	1	2
Alcoholism ...	3	...	...	..	...	...	2	1	...	4
Nephritis and Bright's Disease...	28	3	...	...	1	1	4	14	5	10
Puerperal Fever ...	1	...	...	...	..	..	1	...	...	1
Other accidents and diseases of Pregnancy and Parturition	4	1	...	...	...	...	3	...	..	...
Congenital Debility and Mal- formation, including Prema- ture Birth. ...	90	86	4	...	...	...	...	...	...	4
Violent Deaths, excluding Suicide	22	4	...	3	2	3	5	3	2	14
Suicides ...	8	...	...	...	...	...	4	3	1	...
Other Defined Diseases ..	249	33	6	7	8	4	22	56	113	65
Diseases ill-defined or unknown	21	...	1	...	...	3	...	5	12	4
TOTALS ...	992	230	81	50	42	44	121	206	218	212
Sub-Entries } Cerebro-spinal included in } Meningitis ...	2	...	1	1	...	...	...	...	...	...
above figures } Pneumonia (Lobar) ...	50	6	6	1	5	6	11	8	7	7

TABLE IIIA.
Causes of Deaths during the Year 1914.

Allocated to the Wards in which they occurred.

CAUSES OF DEATH.	WARDS.									
	All Ages.	Central.	Cellingwood.	Dockway.	Linskill.	Milbourn.	Percy.	Preston.	Rudyard.	Trinity.
Enteric Fever... ..	7	1	...	3	...	...	1	1	1	...
Small-pox ... ..	...	...	...	...	...	...	...	...	...	...
Measles	9	1	...	1	...	1	4	1	1	...
Scarlet Fever... ..	5	1	...	...	1	...	1	...	...	2
Whooping Cough	10	1	1	2	2	...	2	1	...	1
Diphtheria and Croup... ..	12	...	...	2	3	1	...	...	2	4
Influenza	5	...	...	2	...	...	...	1	1	1
Erysipelas	3	...	1	1	...	...	...	1	...	...
Phthisis(Pulmonary Tuberculosis)	75	12	10	7	6	10	7	3	14	6
Tuberculous Meningitis	15	2	1	2	1	2	2	...	1	4
Other Tuberculous Diseases	24	2	1	4	1	6	1	4	3	2
Cancer, malignant disease	50	5	4	5	5	6	4	5	8	8
Rheumatic Fever	4	1	...	...	1	1	...	...	...	1
Meningitis	11	...	4	...	...	2	...	...	2	3
Organic Heart Disease	79	2	12	8	13	5	7	6	15	11
Bronchitis	81	9	11	11	5	12	3	2	14	14
Pneumonia (all forms)... ..	95	7	9	12	5	18	8	4	19	13
Other diseases of respiratory organs	8	...	1	1	1	3	...	2	...	...
Diarrhoea and Enteritis	61	3	8	12	6	10	2	3	8	9
Appendicitis and Typhlitis	4	...	...	1	1	...	...	1	1	...
Cirrhosis of Liver	8	1	1	...	4	1	...	...	1	...
Alcoholism	3	...	...	1	...	...	...	...	1	1
Nephritis and Bright's Disease	28	...	6	3	1	1	5	4	6	2
Puerperal Fever	1	...	...	...	...	...	...	...	1	...
Other accidents and diseases of Pregnancy and Parturition...	4	...	...	...	...	...	1	1	1	1
Congenital Debility and Malformation,including Premature Birth	90	7	14	19	8	9	10	3	12	8
Violent Deaths,excluding Suicide	22	1	3	3	...	2	1	6	2	4
Suicide	8	1	3	...	...	1	1	...	2	...
Other Defined Diseases	249	35	20	28	36	22	26	28	34	20
Diseases ill-defined or unknown...	21	3	1	3	4	2	...	2	3	3
TOTALS	992	95	111	131	104	115	86	79	153	118
Sub-Entries included in above figures } Cerebro-spinal Meningitis	2	...	2	...	...	...	...	...	...	...
Sub-Entries included in above figures } Pneumonia (Lobar)	50	3	3	6	3	9	3	3	8	12

TABLE IV.

Infantile Mortality during the Year 1914.

Nett Deaths from stated Causes at various Ages under One Year of Age.

CAUSE OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 4 Weeks.	4 Weeks and under 3 Months.	3 Months and under 6 Months.	6 Months and under 9 Months.	9 Months and under 12 months.	Total Deaths under 1 Year.
All causes :—										
Certified	46	13	7	3	69	48	34	33	33	217
Uncertified	13	...	...	...	13	...	...	...	...	13
{ Small-pox ... ..	...	...	...	...	...	...	...	...	...	...
{ Chicken-pox ... ..	...	...	...	...	...	...	...	...	...	...
{ Measles ... ..	...	...	...	...	...	1	...	...	1	2
{ Scarlet Fever ... ..	...	...	...	...	...	...	...	...	...	...
{ Whooping Cough ... ..	...	...	...	...	...	1	1	...	...	2
{ Diphtheria and Croup ... ..	...	...	...	...	...	...	...	1	...	1
Erysipelas ... ..	...	...	...	...	...	...	1	...	...	1
{ Tuberculous Meningitis ... ..	...	...	...	...	...	...	...	2	2	4
{ Abdominal Tuberculosis ... ..	...	...	...	...	...	1	...	...	...	1
{ Other Tuberculous Diseases ... ..	...	...	...	...	...	...	...	...	1	1
Meningitis (not Tuberculous) ... ..	...	1	...	...	1	1	...	...	...	2
Convulsions	3	1	...	...	4	3	4	4	2	17
Laryngitis ... ..	...	...	...	...	...	...	...	...	1	1
Bronchitis ... ..	...	1	...	1	2	7	3	4	9	25
Pneumonia (all forms) ... ..	...	1	...	...	1	3	8	4	6	22
{ Diarrhoea ... ..	...	...	...	...	...	2	4	6	3	15
{ Enteritis ... ..	...	...	...	...	...	8	6	9	2	25
Gastritis ... ..	...	...	...	...	...	1	...	...	1	2
Syphilis ... ..	...	...	...	...	...	2	...	1	...	3
Rickets ... ..	...	...	...	...	...	...	...	...	...	...
Suffocation, overlying	1	...	...	...	1	1	...	...	...	2
Injury at Birth	1	1	...	...	2	...	...	...	...	2
Atelectasis	3	...	...	...	3	...	...	...	...	3
{ Congenital Malformations	2	1	...	...	3	1	1	...	...	5
{ Premature Birth	23	2	2	1	28	1	...	...	...	29
{ Atrophy, Debility, and Marasmus	23	4	3	1	31	11	5	2	1	50
{ Other Causes	3	1	2	...	6	4	1	...	4	15
Totals	59	13	7	3	82	48	34	33	33	230

Nett Births in the year :—Legitimate, 1,671 ; Illegitimate, 65.

Nett Deaths in year of { Legitimate infants, 224.
 { Illegitimate do. 6.

TABLE IV_A.

Infantile Mortality during the Year 1914.

Allocated to the Wards in which they occurred.

CAUSES OF DEATH.	WARDS.									
	Total Deaths under 1 Year.	Central.	Collingwood.	Dockwray.	Linskill.	Milbourn.	Percy.	Preston.	Rudyard.	Trinity.
{ Smallpox ... ..	...	...	...	...	...	...	...	...	...	...
{ Chickenpox ... ..	...	...	...	...	...	...	...	...	...	...
{ Measles	2	...	...	1	...	...	...	1	...	...
{ Scarlet Fever ... ..	...	...	...	...	...	...	...	...	...	...
{ Whooping Cough	2	...	1	...	1	...	...	...	...	...
{ Diphtheria and Croup... ..	1	...	...	...	...	...	...	...	1	...
Erysipelas	1	...	1	...	...	...	...	...	...	...
{ Tuberculous Meningitis	4	...	1	...	...	...	...	...	...	3
{ Abdominal Tuberculous	1	1	...	...	...	...	...	...	...	...
{ Other Tuberculous Diseases	1	...	...	1	...	...	...	...	...	...
Meningitis (not Tuberculous)	2	...	...	...	...	...	...	...	1	1
Convulsions	17	3	1	5	...	5	...	1	2	...
Laryngitis	1	...	...	1	...	...	...	...	...	...
Bronchitis	25	6	3	4	3	4	...	1	1	3
Pneumonia (all forms)... ..	22	1	2	3	2	2	2	1	6	3
{ Diarrhœa	15	...	3	2	1	5	2	2	..	...
{ Enteritis	25	1	3	4	3	5	...	1	5	3
Gastritis	2	...	...	1	1	...	...	..	...	...
Syphilis	3	...	1	1	...	...	...	...	1	...
Rickets ... ..	...	...	...	...	...	...	...	...	...	...
Suffocation, overlying	2	...	1	...	...	1	...	...	...	...
Injury at Birth	2	...	1	...	...	...	...	...	1	...
Atelectasis	3	...	...	...	1	...	...	1	1	...
{ Congenital Malformations	5	...	1	...	2	...	1	...	...	1
{ Premature Birth	29	2	5	4	...	5	3	1	4	5
{ Atrophy, Debility, and Marasmus	50	4	7	14	5	4	6	2	6	2
{ Other Causes... ..	15	2	2	3	1	...	1	1	2	3
Totals ...	230	20	33	44	20	31	15	12	31	24

IV.

*Medical Inspection of School
Children.*



County Borough of Tynemouth.

SIXTH

ANNUAL REPORT

ON THE

Medical Inspection of School
Children.

1914

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EDUCATION OFFICES,
26 NORTHUMBERLAND SQUARE,
NORTH SHIELDS.
1st March, 1915.

TO THE CHAIRMAN AND MEMBERS OF THE
COUNTY BOROUGH OF TYNEMOUTH EDUCATION COMMITTEE.

Ladies and Gentlemen,

I beg to submit my Sixth Annual Report upon the Medical Inspection of Elementary School Children for the year ended 31st December, 1914.

I have again to report an increase in the volume of work and an improvement in the results obtained.

The arrangements for carrying on the work of the Medical Department continue as in previous reports amplified and improved as experience teaches.

The children conforming to three Age-groups, viz., (a) Entrants, (b) 8-9 years of age, (c) Leavers, were inspected during the year.

The increase of 565 children inspected was due to the inclusion of children 12 years of age in the Leavers group, previously this group being limited to children of 13 years of age and upwards.

The details of the treatment of minor ailments at the School Clinic for a complete year are first shown in this report.

The preparation of this report has been rendered more difficult owing to the temporary resignation of my Clerical Assistant (Mr. T. Little) on the 10th November, to take up Military duty with the 6th Battalion Northumberland Fusiliers.

I take this opportunity of once again tendering my thanks to the members of the Medical Inspection Sub-Committee, Teachers, and Voluntary Helpers for much valued help rendered to me consistently throughout the year.

I am,

Your obedient Servant,

JAMES McCONNELL.

GENERAL REVIEW OF THE HYGIENIC CONDITIONS IN THE SCHOOLS.

The following alterations, renovations, and improvements have been carried out at the various schools during the past year, all of which were of Hygienic importance.

The buildings of all the schools were maintained in good order.

At the Royal Jubilee School a new entrance was provided to the first floor of the Boys' Department, with stairs on the outside of the building, and fitted with panic door and railing; the brick boundary wall of the Infant and Girls' Department was lowered to the parapet height and fitted with iron palisading, with a view to reducing the danger of accidents to a minimum, as the children are now enabled to see the street traffic from the playground; a new range of 5 ware lavatory basins was provided in the Boys' Department. The drains in this department were also re-arranged and a new inspection chamber with air-pipe provided.

At the Western School the boys' entrance to the Junior Department was altered to open outwards and provided with panic bolt; in the Girls' Department all opaque glass was removed from the windows, and 9 windows in the Infant and Junior Departments were altered to vertical swivel for improved ventilation purposes; in the Junior Department two old iron ranges of lavatory basins were replaced by new ware basins, and two additional similar ranges placed in the corridors of the Junior Department.

13 windows were altered to vertical swivel for improved ventilation purposes in Cullercoats School.

Parts of the playground in the Western and Queen Victoria Schools were relaid in concrete cement.

The Outhouses, Latrines, Urinals, and Heating Chamber of all the Schools were kept in good order, and a good and sufficient supply of water was maintained for drinking and cleansing purposes.

A new folding partition was supplied to the Senior Department of Queen Victoria School, so as to make two separate departments for boys and girls.

All long desks in the schools are gradually being replaced by up-to-date dual desks.

The general standard of cleanliness of the schools has been maintained by the Caretakers during the past year.

Western Council School was cleaned, distempered and painted (inside only) ; Queen Victoria School was cleaned internally and distempered ; St. Peter's School was cleaned, distempered and painted on the inside, the outside being painted at the expense of the managers ; King Edward School was cleaned and distempered (inside only).

CO-RELATION OF SCHOOL MEDICAL SERVICE WITH THE PUBLIC HEALTH SERVICE AND REVIEW OF ACTION TAKEN TO DETECT AND PREVENT THE SPREAD OF INFECTIOUS DISEASES.

The two services continue to co-operate as in previous years in regard to the control of the chief Infectious and Contagious diseases. The M.O.H. as principal S.M.O. is supplied with a weekly return sheet of Infectious and Contagious diseases showing the number of cases and contacts absent from each department of each school, and he is able, therefore, to judge and act upon any likely relationship between disease and department.

During the year 2387 individual children have been absent from school through infectious disease as compared with 1061 the previous year. The average weekly absence this year was 291 as against 157 for 1913.

It will be seen that during 1914 there was a total increase of 1413 cases of Infectious and Contagious diseases, excluding 87 cases of Sore Throats and Influenza recorded in last year's table. The increase is made up as follows :—117 cases of Scarlet Fever, 13 cases of Diphtheria, 11 cases of Emetic Fever, 773 cases of Measles, 166 cases of Whooping Cough, 266 cases of Mumps, 84 cases of Chicken Pox, and 81 cases of Ophthalmia ; whilst there was a decrease of 98 cases of Ringworm, Impetigo, Scabies and Verminous Conditions.

It is apparent, therefore, that the School Attendance Returns for the past year were appreciably affected through the absence of children on account of the infectious diseases mentioned. It was not found necessary to recommend the temporary closure of any department or school, though Measles threatened in the months of February and March to compel such procedure.

As can be seen from Table VI. the large majority of Ringworm and Scabies cases have been treated at the School Clinic, with the result that these children made an earlier return to school than they otherwise would have done.

Mumps have been considerably more prevalent this year than in any previous year since Medical Inspection of School Children commenced.

The number of Exclusion Certificates granted to children by the School Medical Department under article 53 (b) during the past year was 1673 on account of Infectious or Contagious disease and 283 on account of other disease or defect.

Various School Departments have been disinfected during the year, and the Ligner Disinfecting Apparatus purchased by the Education Committee for School purposes has been found of considerable value.

TUBERCULOSIS.

The arrangements for the better supervision, control, and treatment of cases of Tuberculosis amongst School Children which were commenced in 1913, and alluded to in my last annual report, were further developed during the past year.

I have had occasion to send a number of children to the Tuberculosis Clinic for report upon, and I am indebted to Dr. Yeates both for his co-operation in this work, which continues to grow, and for the following Table :—

Table I.—Number of Children treated since the opening of the Tuberculosis Dispensary.

	Children of School-age.				Children not of School-age.				Total
	1913		1914		1913		1914		
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	
PULMONARY	9	5	19	13	1	1	5	3	56
NON-PULMONARY—									
Glands.	6	2	4	11	—	1	—	—	24
Skin	1	1	2	6	—	1	—	—	11
Peritoneal . . .	3	1	1	—	—	1	2	—	8
Osseous	1	—	—	—	—	—	—	—	1
Eyes	—	1	—	—	—	—	—	—	1
FATAL	—	—	1	1	3	—	3	1	9
	20	10	27	31	4	4	10	4	110

The Tuberculosis Clinic is open especially for the treatment of School Children on Friday afternoons. The exclusion from and re-admission to school of these children is regulated by certificate issued in duplicate ; one copy of which goes to the Head Teacher and the remaining copy to the Secretary.

The attendance of the children at the Tuberculosis Clinic during School hours is checked by the issue of a card for each child, which states the time of arrival and departure as in the case of children attending the School Clinic. In this way the Committee is able to claim grant for all such attendances, provided the requirements of the Board of Education are met in each case.

The total number of cases of Pulmonary or Non-Pulmonary Tuberculosis in attendance and not in attendance at School, of whom we have a record of, is shown in Table IX., and the number of cases supervised, or treated, during the past year in Table V. While the diagnosis of early Tuberculosis remains a difficult matter; its close relationship to malnutrition associated with some recurring respiratory, gastric, or other ill-defined illness, extending over a prolonged period of a child's life, makes one believe that, provided these children could be at an early stage removed to a Day Open-Air School, or for preference a Residential School in the worst cases, the vast majority could be restored to such a condition of health as to ultimately throw off this crippling and often fatal disease. At present these pre-tuberculous or tuberculous children, even under their present adverse conditions at home or school, have varying periods of comparative good health, usually in the summer months. This condition of health is followed sometime later by a relapse and further loss of ground; still later the loss of flesh and strength becomes more noticeable, and the parent becomes anxious as regards recovery, and wonders if her child is in a "decline." The Medical Attendant is once again called in, he renews an acquaintance with a child seen by him some time before, and often can only confirm the mother in her opinion, who, before many weeks are over, may be mourning the loss of a healthy born child.

What must be realised in these cases is that in the very early stages of this fell disease the symptoms and signs are very insidious and slow, and that the treatment required is an early restoration and continuation over a prolonged period of correct nurture under ideal conditions and Medical Supervision, while the child has still the vital resistance to arrest the infection and recover.

It will be apparent therefore, that the Medical attendant cannot secure the necessary conditions for treatment in the homes

of many of these cases, apart from the monetary aspect of the question, which may mean his attendance ceasing at a temporary recovery, just when continued good was likely to avail. How then can these children, secured early, be better treated than in Residential and Day Open-Air Schools throughout the country, where education can advantageously go hand-in-hand with treatment and ultimate success be almost assured.

GENERAL STATEMENT OF THE EXTENT AND SCOPE OF THE MEDICAL INSPECTION CARRIED OUT DURING THE YEAR.

The number of visits made to school departments was 144 on account of Routine Inspection and 42 on account of absentees, and on both occasions such re-inspections were carried out as were thought necessary.

The children inspected during the year conformed to the following groups.

I. ROUTINE INSPECTION :—

- (a) Infants not previously inspected (Entrants).
- (b) Children 8-9 years old.
- (c) Children 12 years old, together with those children 13 years old who have not previously been inspected at the age of 12 (Leavers).

II. SPECIAL INSPECTIONS.

- (a) At School.
- (b) At School Clinic.

III. Inspections in connection with the prevalence of any Infectious or Contagious Disease.

The number of children inspected, 1st January to 31st December 1914, classified according to age and sex in the Routine Inspection,

and sex only in the Special Inspections, and the number of re-examinations was as in Table II. A. and B.

TABLE II.

A. "Code" Groups.

Age.	ENTRANTS.						LEAVERS.					Grand Total
	3	4	5	6	Other ages.	Total	12	13	14	Other ages.	Total	
Boys	—	—	524	149	3	676	465	418	—	25	908	1584
Girls	—	—	500	159	3	662	510	445	2	22	979	1641
Totals	—	—	1024	308	6	1338	975	863	2	47	1887	3225

B. Groups other than "Code."

	Intermediate Group (if any).	Special Cases.	Re-examinations (i.e., No. of children re-examined).
Boys	375	895	675
Girls	588	980	776
Totals	1163	1875	1451

ROUTINE INSPECTIONS.

Compared with the previous year the number of Entrants inspected shows a decrease of 180, partly accounted for by absentees. The number of children 8-9 years old inspected shows a small decrease of 14, and the number of Leavers inspected shows an increase of 759, due to the absorption for the first time of children of 12 years of age in this group. In succeeding years this nett total

increase of 565 is not likely to continue, and the number of children for inspection should approximate to that examined in 1913, namely 3823, plus a small annual increase so long as the children conforming to the three age periods mentioned above are inspected.

SPECIAL INSPECTIONS.

There was an increase of 688 special cases inspected during the past year, chiefly brought about by the scheme of treatment of minor ailments at the School Clinic. This increase is not likely to be so large in future years. The nature of the cases were similar to previous years and embrace 410 cases submitted for examination by the Attendance Department.

RE-EXAMINATIONS.

There was an increase of 206 in the number of re-examinations made, this increase, however, is not likely to continue at the same rate in future years.

PARENTS.

1694 or 38.6% of Parents or Guardians were present at the Routine Inspection of their children at the schools, which is a small increase on the previous year. In addition 1457 parents attended the School Clinic.

Where a child was found to be physically defective and the parents or guardians were unable to be present at the Routine Inspection at School, I continued, as in previous years, to endeavour to secure an interview at the School Clinic with a view to treatment.

The number of parents declining inspection was 7.

REVIEW OF THE PHYSICAL CONDITION OF CHILDREN INSPECTED.

A return of the physical condition of the children inspected is shown in Table III.

CLOTHING AND FOOTGEAR.

There was a slight increase on the previous year in the number of children recorded as being sent to school with unsatisfactory clothing and footgear.

The amelioration of those children with clothing either insufficient or in disrepair is difficult to obtain in many cases. Verminous clothing was dealt with as part of the verminous child, who was supervised by the School Nurse until made satisfactory.

The provision of boots to School Children by means of a local fund is referred to on page 24.

CLEANLINESS.

BOYS.—The cleanliness of the boys continues satisfactory, 67 out of 2159 examined, or 3.1%, being dirty or verminous.

GIRLS.—469, or 21%, of the girls had nits only in the hair, as compared with 28% in the previous year; while 21, or 1.0%, had live vermin present. The number of children and degree of verminous infection has again diminished; the improvement being due to the increased attention on the part of the parents, the vigilance of the teachers and the following up of cases by the School Nurse. It is apparent, however, that there will be certain children out of dirty homes, who will have to be supervised regularly each year, these children being well known both to the School Nurse and Teacher.

CLEANSING SCHEME.

Owing to the attendance of the School Nurse each morning at the Treatment Clinic, much of the time devoted to the examination of the children for cleanliness at the schools was otherwise occupied. It should be noted, however, from my remarks in the preceding paragraph, that there is not the same necessity as there was 3 or more years ago for the whole of the children of a department to pass in front of the School Nurse. Certain Schools and departments also can be omitted, as Head Teachers concerned report the few cases as they occur to the School Nurse for following up.

TABLE III.—Return showing the Physical Condition of Children Inspected.

CONDITION.		ENTRANTS.				LEAVERS.				INTERMEDIATE GROUP.				TOTAL.				SPECIAL CASES.		
		Boys	Girls	Total	Per cent.	Boys	Girls	Total	Per cent.	Boys	Girls	Total	Per cent.	Boys	Girls	Total	Per cent.	Boys	Girls	Total
TOTAL INSPECTED.....		676	662	1338	96.9	908	979	1887	98.9	575	588	1163	98.9	2159	2229	4388	98.3			
Clothing	Satisfactory	668	652	1320	98.6	877	935	1812	96.0	550	561	1111	95.5	2095	2148	4243	96.6			
	Unsatisfactory	8	10	18	1.3	31	44	75	3.9	25	27	52	4.5	64	81	145	3.4			
Footgear.	Satisfactory	663	649	1312	98.0	844	930	1774	94.0	520	556	1076	92.5	2027	2135	4162	94.8			
	Unsatisfactory	13	13	26	1.9	64	49	113	5.9	55	32	87	7.4	132	94	226	5.1			
Cleanliness of Head.	Clean (i.e., no nits or pediculi) ..	667	515	1182	88.3	907	780	1687	89.4	571	449	1020	87.6	2145	1744	3889	88.5			
	Nits only	8	140	148	11.0	—	196	196	10.3	3	133	136	11.6	11	469	480	10.9			
	Pediculi.....	1	7	8	.6	1	3	4	.2	1	6	7	.6	3	16	19	.4	10	72	82
Cleanliness of Body.	Clean	671	652	1323	98.8	878	966	1844	97.7	557	572	1129	97.0	2106	2190	4296	97.9			
	Dirty	2	9	11	.8	25	12	37	1.9	16	13	29	2.4	43	34	77	1.7			
	Pediculi present	3	1	4	.3	5	1	6	.3	2	3	5	.4	10	5	15	.3			
Nutrition.	Excellent	98	70	168	12.5	97	114	211	11.1	96	82	178	15.3	291	266	557	12.6			
	Normal	498	467	965	72.1	662	698	1360	72.0	362	393	755	64.9	1522	1558	3080	70.2			
	Below Normal	78	123	201	15.0	142	163	305	16.1	114	110	224	19.2	334	396	730	16.6			
	Bad	2	2	4	.3	7	4	11	.5	3	3	6	.5	12	9	21	.4	21	39	60
Nose and Throat.	No Defect.....	468	479	947	70.6	716	750	1466	77.5	410	435	845	72.5	1594	1664	3258	74.3			
	*Mouth Breathers	34	28	62	4.6	29	26	55	2.9	24	19	43	3.7	87	73	160	3.6			
	Tonsils: slightly enlarged	167	144	311	23.2	156	191	347	18.3	135	126	261	22.4	458	461	919	20.8			
	Tonsils: much enlarged	3	6	9	.6	4	8	12	.6	—	1	1	.0	7	15	22	.5			
	Adenoids: slight	2	5	7	.5	2	4	6	.3	2	4	6	.5	6	13	19	.4			
	Adenoids: marked	2	—	2	.1	1	—	1	.0	4	3	7	.6	7	3	10	.2			
External Eye Disease.	No Disease	664	648	1312	98.0	890	958	1848	97.9	565	575	1140	98.0	2119	2181	4300	97.9			
	Blepharitis	4	5	9	.6	3	5	8	.4	2	3	5	.4	9	13	22	.5			
	Conjunctivitis	4	4	8	.6	5	9	14	.7	4	5	9	.8	13	18	31	.7			
	Corneal Opacities.....	3	3	6	.5	8	7	15	.8	4	5	9	.8	15	15	30	.6			
	Other Disease	1	2	3	.2	2	—	2	.1	—	—	—	—	3	2	5	.1			
Ear Disease.	No Disease	666	642	1308	97.7	884	962	1846	97.8	555	578	1133	97.4	2105	2182	4287	97.6			
	Obstruction R.....	1	3	4	.3	7	4	11	.5	2	2	4	.3	10	9	19	.4			
	„ L.....	—	2	2	.1	6	4	10	.5	2	1	3	.2	8	7	15	.3			
	Otorrhoea: R.....	4	5	9	.6	3	6	9	.5	5	3	8	.7	14	14	28	.6			
	„ L.....	5	10	15	1.1	6	3	9	.3	10	3	13	1.1	19	16	35	.8			
Teeth.	Sound	121	133	254	18.9	111	152	263	13.9	61	89	150	12.9	293	374	667	15.2			
	Less than 4 decayed	262	270	532	39.7	515	565	1080	57.2	257	256	513	44.1	1034	1091	2125	48.4			
	Four or more decayed	289	254	543	40.5	282	262	544	28.8	257	243	500	42.9	828	759	1587	36.1			
	Sepsis.....	4	5	9	.7	—	—	—	—	—	—	—	—	4	5	9	.2			
	Other Disease	—	—	—	—	2	—	2	.1	1	1	2	.1	3	1	4	.1			
Heart and Circulation.	No Disease	675	658	1333	99.6	900	966	1866	98.8	572	582	1154	99.2	2147	2206	4353	99.2			
	Organic Disease.....	1	3	4	.3	3	5	8	.4	1	4	5	.4	5	12	17	.3			
	Functional Disease	—	1	—	—	4	1	5	.2	2	1	3	.2	6	2	8	.1			
	Anæmia.	—	—	1	—	1	5	6	.3	—	1	1	.0	1	7	8	.1			
	Other Disease	—	—	—	—	—	2	2	.1	—	—	—	—	—	2	2	—			
Lungs.	No Disease	670	656	1326	99.1	901	975	1876	99.4	569	581	1150	98.8	2140	2212	4352	99.1			
	Chronic Bronchitis and Bronchial Catarrh	5	6	11	.8	5	2	7	.3	3	7	10	.8	13	15	28	.6			
	Tuberculosis	—	—	—	—	1	2	3	.2	2	0	2	.1	3	2	5	.1			
	„ suspected	1	—	1	—	—	—	—	—	—	—	—	—	1	—	1	—			
Nervous System.	No Disease	672	662	1334	99.7	907	978	1885	99.9	575	587	1162	99.9	2154	2227	4381	99.8			
	Epilepsy (major or minor)	—	—	—	—	—	—	—	—	—	1	1	.1	—	1	1	—			
	Chorea.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
	Other Disease	4	—	4	.3	1	1	2	.1	—	—	—	—	5	1	6	.1			
Skin.	No Disease	665	652	1317	98.4	895	968	1863	98.7	568	579	1147	98.6	2128	2199	4327	98.6			
	Ringworm: body	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
	„ head	1	2	3	.2	—	1	1	—	2	1	3	.2	3	4	7	.1			
	Impetigo	6	5	11	.8	2	2	4	.2	1	2	3	.2	9	9	18	.4			
	Seabies	—	—	—	—	3	2	5	.2	2	1	3	.2	5	3	8	.1			
Rickets.	No Disease	653	652	1305	97.5	906	976	1882	99.7	562	583	1145	98.4	2121	2211	4332	98.7			
	Slight	13	5	18	1.3	2	3	5	.3	9	3	12	1.0	24	11	35	.8			
	Marked	10	5	15	1.1	—	—	—	—	4	2	6	.5	14	7	21	.4			
	Other Disease	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
Deformities.	No Deformity	669	657	1326	999															

During the past year the Nurse carried out the following inspections :—

Number Inspected.	Clean.	Vermin or Nits.	Cleansed.	N.S.P.C.C. or Cleansing St. or Institution.	Prosecution.
574	449	125	113	12	4

The departments visited and the children inspected were largely those most likely to be found erring in this respect. 4 parents (4 children affected) were prosecuted under Section 122 of the Children Act, (1908), 3 parents being fined 5s. and costs, and 1 parent 10s. and costs.

5 of the children were removed to Industrial Schools as they were found unsatisfactory in other respects. Two cases (three children affected) were reported to the N.S.P.C.C. ; in one case both parents received two months imprisonment, while in the other case the parents left the district.

NUTRITION.

17% of the children were classified as subnormally nourished, as compared with 16% the previous year ; 16% of the boys and 18% of the girls examined. Our percentage of subnormal children is high compared with that quoted for other towns, which might lead one to think that there are some local causes to account for this ; but as a matter of fact the variation in the percentage throughout the country is due to the different standards adopted by different Medical Inspectors. Height and Weight enters as a factor in summing up Nutrition only to a limited degree, it being quite possible for a child to be below the average Height and Weight, and yet really normally nourished, as made evident by appearance, complexion, muscular tone, glint in the eye, and response ; conversely a child approximately or perhaps even slightly more than the average height and weight may yet be under-nourished. In my own classifications I attempt to form a normal physical standard for each child in my own mind, and to gauge whether that child has reached this standard or not, thus allowing for the influence of "breed," rather than having one fixed standard at each of the

three age periods and asking each child to reach that. The factors entering into the causation of Malnutrition remain as mentioned in previous reports, more than one often being present in the same child, and consequently the successful treatment and improvement of that child depends not only on the removal of one, but all of these causes, which can only be ensured in many of these cases by their temporary nurture and education wholly or partially each day at a Residential or Day Open-Air School.

I interview the parents of all children subnormally nourished whenever I consider good is likely to come of it, and one is able thereby to judge fairly accurately what causes are giving rise to it. Incidentally one may mention that many of these children develop capricious appetites, especially for starchy foods, and often will only take such food as they like, the mother in her anxiety being only too glad to get the child to take anything rather than nothing.

The adoption of the Provision of Meals Act will improve physically those children undernourished through inadequate feeding, who are provided with a good substantial meal each school day. The names of these children are sent on immediately to the Secretary to be dealt with.

As in previous years I had under periodical observation many cases of this nature with a view to watching their progress and advising the parents as to treatment.

Nose and Throat.

Defects of the Nose and Throat and their following up continue to form an important part of our work.

Mouthbreathing is commonly the result of adenoids, and so it would be correct to assume that the number quoted under this heading were additional cases of adenoids.

An increasing number of cases of Enlarged Tonsils and Adenoids requiring operation have been treated at the local Jubilee

Infirmity during the past year with gratifying results. Teachers are now familiar with the evil results arising from obstruction of the Nose and Throat and are sending these cases with their parents to the School Clinic for advice. A large number of children with Nose and Throat defects require further observation for a period, combined with some home attention and breathing exercises, before recommending operation; similarly cases operated upon require observation to see that correct breathing is practised and ultimately prevails.

EXTERNAL EYE DISEASE.

Phlyctenular Conjunctivitis still continues to be a common ailment and one of a nature difficult to remedy in many cases. Some were treated at the School Clinic, though the very worst were recommended treatment elsewhere and supervised at the clinic, as these children are quite unfit for ordinary Elementary School. Ophthalmia was considerably more prevalent during the past year, though each autumn this very infectious eye complaint assumes an epidemic nature varying in extent amongst the poorer children.

EAR DISEASE.

The School Nurse was able to undertake the treatment of Discharging Ears at the School Clinic with very gratifying results and a large number of these cases attended the Clinic daily for a considerable number of weeks. Several children with deafness due to obstruction (wax) had their ears syringed.

TEETH.

The number of children with carious teeth and number of teeth decayed are much the same as in previous years. Roughly 15 to 20% of the children have sound teeth and 80% one or more carious teeth. I am sure, however, that the children are taking more interest in the daily cleansing of the mouth, which in itself is a very desirable result. Several Head Teachers are laying particular stress upon this subject.

HEART AND CIRCULATION.

The number of children with organic disease of the Heart discovered this year and preceding years, of whom we have a record, totals 50, or 0.47% of the average number of children on the school registers during the year. Mitral Regurgitation largely predominates being diagnosed in 32 cases. 5 children died from Heart disease during the past year.

LUNGS.

Pulmonary Tuberculosis was diagnosed in 5 children attending school. The total number of cases of which we have a record is 33, or 0.3% of the average number of children on the school registers during the year. 6 children died from this affection during the past year. I have already referred to the subject of Tuberculosis on page 7.

NERVOUS SYSTEM.

One child was attending school subject to minor epileptic seizures.

Children suffering from Chorea were supervised at the Clinic. The parents of these cases came with their children to the Clinic for advice in the first instance, and for supervision later.

SKIN.

The School Nurse has done excellent work in connection with the treatment of Ringworm at the Clinic. Many of these cases attended daily to ensure the treatment being efficient, and consequently much time was devoted to them. Similar remarks apply to the treatment of Scabies and to Impetigo, of which latter there were a large number treated at the Clinic in the course of the past year. Undoubtedly this treatment ensures these children returning to school much sooner than they otherwise would.

RICKETS.

As in the preceding year more cases were discovered amongst the boys than the girls. Being a disease of Infancy the defects are most evident in the Infant Department. Parents were advised with regard to correct treatment, which is largely of a home nature, and the children were re-examined at intervals.

DEFORMITIES.

Lameness and wasting of limbs, the result of Infantile Paralysis, was found to be a common form of deformity, being present in 11 children. 3 children were lame from other causes, 2 had Spinal Curvature, 10 marked deformity from Rickets, 3 Talipes, 4 Ankylosed Joints, 4 Amputation of a limb (all boys), and 3 congenital deformity from birth.

TUBERCULOSIS, NON-PULMONARY.

The total number of cases of which we have a record is 88, or 0.8% of the average number of children on the school registers during the year. My further remarks upon the subject of Tuberculosis appear on page 7.

VISION.

Between 9 and 10% of the children examined were discovered to have vision of $\frac{6}{12}$ or under, as tested by Snellen's Test Types at 20 ft. distance, which means that the majority of these children will require spectacles. 53.2% of the cases of defective vision notified to parents were treated during the year.

Again I have to record the difficulty which many parents experienced in securing the necessary treatment for their children. Owing to the lack of any local charitable institution which undertakes the examination and prescription of spectacles, these parents are compelled to take their children to Newcastle-on-Tyne, and various reasons at home either unduly delay or prevent many from undertaking the journey.

Again there are still some parents very indifferent and ignorant regarding the need and advisability of their children wearing spectacles

Teachers are becoming alert in their detection of defective eye-sight as being a possible cause of backwardness, or what was taken previously as carelessness in work, and are bringing these children forward for advise.

I am of the opinion that the Committee might well consider the advisability of undertaking the examination and prescription of the spectacles required in those children whose parents are unable for various reasons to make the journey to Newcastle.

HEARING.

The teachers are also becoming increasingly aware of the association of mouth-breathing and deafness, with dullness and backwardness, and bringing these children forward for examination.

OTHER DISEASE OR DEFECT.

ENTRANTS, Boys.—Scarlet Fever 1, Phimosi 1, Undescended Testicle 1, Rectal Polypus 1 case.

Girls.—Enlargement of Thyroid Gland 1.

LEAVERS, Boys.—Cystic Swelling knee joint 1, Inguinal Hernia 3.

INTERMEDIATES, Girls.—Tape Worm 1.

VACCINATION.—20.4% of children had no apparent vaccination marks.

The average Heights and Weights of the children examined were as in Table IV.

TABLE IV.
HEIGHT.

Boys.				Girls.			
Age.	No. Measured.	Cms.	Ins.	Age.	No. Measured.	Cms.	Ins.
5	518	102.5	40.2	5	501	102.5	40.2
6	133	106.5	42.0	6	134	105.5	41.5
8	589	116.7	46.0	8	508	114.7	45.2
11	20	136.0	53.5	11	20	137.7	54.2
12	456	136.0	53.5	12	512	136.5	53.7
13	411	139.7	55.0	13	439	140.0	55.2

WEIGHT.

Boys.				Girls.			
Age.	No. Weighed.	Kilos.	Lbs.	Age.	No. Weighed.	Kilos.	Lbs.
5	518	17.7	39.1	5	501	17.2	37.8
6	133	18.7	41.7	6	134	17.7	39.3
8	589	22.4	49.6	8	508	21.8	48.1
11	20	31.1	68.6	11	20	30.5	67.4
12	456	31.6	69.9	12	512	31.4	69.5
13	411	34.0	75.1	13	439	34.4	75.9

THE TREATMENT OF DEFECTS OF CHILDREN DURING
1914 is shown in Table V

The results obtained during the year were generally most satisfactory. The difficulties pertaining to the treatment of defects of vision have been mentioned previously, and the treatment of Nose and Throat defects requiring operation is considerably influenced by the natural nervousness of many parents regarding operations and anaesthetics.

We are indebted to the Local Jubilee Infirmary, and to the following Institutions in Newcastle-upon-Tyne, namely, the Fleming Memorial Hospital for Sick Children, the Royal Victoria Infirmary, the Eye Infirmary, and the Throat and Ear Hospital, for much gratuitous and valuable service rendered to many School Children of this Borough during the year. Incidentally it may be mentioned that the treatment of defects of School Children at these institutions during the present year is likely to be considerably affected owing to the War.

SCHOOL CLINIC.

Perhaps the chief new feature of the work of School Hygiene during the past year was the scheme of treatment of minor ailments carried out at the School Clinic.

The number and class of cases which have attended the Clinic throughout the year is shown in Table VI.

TABLE V.—Treatment of Defects of Children during 1914.

CONDITION.	No. of defects found for which Treatment was considered necessary.			No. of defects for which no report is available.	No. of defects treated,	Results of Treatment.			Nature of Treatment obtained.			Agency of Treatment obtained.				No. of defects not treated.	Percentage of defects treated.	Other conditions under S.M.O.'s observations only.
	From previous year.	New.	Total.			Remedied.	Improved.	Unchanged.	Medication.	Operation.	Special attention at Home or School under S.M.O.'s Supervision.	Private Medical Practitioner.	Hospital or Charitable Institution.	School Clinic.	Home or School.			
Cleanliness of Head.....	—	207	207	—	207	207	—	—	82	—	125	—	*12	82	113	—	100 ⁰ / ₀	—
Cleanliness of Body.....	—	15	15	—	15	15	—	—	—	—	15	—	—	—	15	—	100 ⁰ / ₀	—
Nutrition	5	44	49	—	49	6	43	—	32	—	17	7	6	19	17	—	100 ⁰ / ₀	28
Nose and Throat.....	43	74	117	—	59	—	56	3	3	50	6	9	45	—	5	58	50.4 ⁰ / ₀	‡161
External Eye Disease	6	359	365	—	365	333	32	—	362	—	3	8	10	344	3	—	100 ⁰ / ₀	13
Ear Disease	16	66	82	—	82	50	26	6	58	1	23	2	3	54	23	—	100 ⁰ / ₀	—
Teeth.....	1	2	3	—	3	2	1	—	—	2	1	1	1	—	1	—	100 ⁰ / ₀	1
Heart and Circulation	13	6	19	1	18	—	13	5 (died)	11	—	7	7	4	—	7	—	94.7 ⁰ / ₀	25
†Lungs	10	43	53	—	53	23	24	6 (died)	33	1	19	7	27	—	19	—	100 ⁰ / ₀	18
Nervous System	9	12	21	—	21	3	16	2	15	—	6	9	6	—	6	—	100 ⁰ / ₀	4
Skin	9	728	737	—	737	698	38	1	736	—	1	12	9	713	3	—	100 ⁰ / ₀	3
Rickets	8	3	11	—	11	—	11	—	6	3	2	—	9	—	2	—	100 ⁰ / ₀	20
Deformities	4	2	6	—	6	3	3	—	6	—	—	1	5	—	—	—	100 ⁰ / ₀	10
Tuberculosis, non-pulmonary ...	33	32	65	1	64	7	54	3 (died)	41	14	9	13	42	—	9	—	98.4 ⁰ / ₀	19
Mental Condition	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	17
Vision & Squint	102	193	295	3	157	151	4	2	156	—	1	15	141	—	1	135	53.2 ⁰ / ₀	100
Hearing.....	13	5	18	—	14	—	4	10	11	—	3	7	4	—	3	4	77.7 ⁰ / ₀	16
Miscellaneous	6	297	303	1	300	287	12	1 (died)	267	10	23	18	23	236	23	2	99.0 ⁰ / ₀	11
	278	2088	2366	6	2161	1785	337	39	1819	81	261	116	347	1448	250	199		446

* Removed to Cleansing Station, Industrial School, or reported to N.S.P.C.C.

‡ Includes 72 Old Operation Cases.

† Includes Tuberculosis Pulmonary.

TABLE VI.

DISEASE OR DEFECT.	TREATMENT.						Advice and Supervision.	
	Number of Cases.		Remedied.		Remaining under Treatment.			
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
Ringworm Scalp	53	38	38	30	15	8	8	4
„ Body	44	28	44	28	—	—	—	—
Impetigo	117	164	117	161	—	3	—	—
Scabies	45	39	42	39	3	—	—	—
Pediculosis	10	72	110	72	—	—	—	—
Other Skin Diseases	105	80	105	76	—	4	39	28
External Eye Disease	171	173	163	163	8	10	15	21
Defective Vision & Squint ..	—	—	—	—	—	—	105	137
Other Eye Defect	—	—	—	—	—	—	2	3
Suppuration Ears	24	30	20	25	4	5	—	—
Obstruction, Ears	24	30	24	20	—	—	—	—
Deafness	—	—	—	—	—	—	25	22
Tuberculosis	—	—	—	—	—	—	17	13
Anæmia, Malnutrition	5	14	5	14	—	—	18	32
Organic Heart Disease	—	—	—	—	—	—	3	5
Chorea & Epilepsy	—	—	—	—	—	—	6	11
Bronchitis.....	—	—	—	—	—	—	23	12
Paralysis	—	—	—	—	—	—	3	2
Other Disease or Defect	60	72	60	72	—	—	82	83
Nose and Throat.....	—	—	—	—	—	—	22	27
Minor Injuries	34	26	34	24	—	2	—	—

It will be seen that the nature of the cases treated were largely those that parents would otherwise have carried out the best way they could at home. It became evident early in the year owing to the large number of children sent to the Clinic, principally by the Head Teachers and the Attendance Department, that two mornings a week would not suffice in order that the maximum benefits might be obtained.

That some such work as this was necessary, even from an attendance at school point of view, is I think, conclusively proved by the free and correct use made by the Head Teachers, who, it may be fair, therefore, to infer, found these children made an earlier return to school than they did previous to this treatment being commenced. The School Nurse has attended the School Clinic each morning for treatment purposes, chiefly on account of

the large number of cases to be dealt with, and the time taken up by some, and also because in practice it was found that only in this way could regular and systematic treatment be secured daily, as for instance in skin and ear diseases. It was also possible to allow many cases to attend school and so be certain of them securing daily treatment by the Head Teachers seeing that these children were allowed to attend the Clinic during school hours as required.

The name of each child attending the Clinic is entered in a register, with the nature of the defect and the treatment given and the time of arrival and departure of each visit of those attending school recorded, a card with similar particulars and the date of the next visit antedated is also given to the child to hand to the Head Teacher, who sees that the child subsequently attends. I consider this part of the work carried out by the School Nurse during the past year has been admirably performed, and much to the advantage of her little patients, with whom she almost invariably seems to be on very good terms. Mothers attend frequently at the first and second visits for home directions, and subsequently if required, though when one considers their other home duties one cannot always be surprised if they do fail to attend. Payments by parents amounted to £2 14s. 6d.

INSPECTION CLINIC.

Owing to the increase of work at the Treatment Clinic I was either relieved of the necessity of seeing many cases I had seen in previous years or able to draft them to the Treatment Clinic after the first visit. A large number, some 400 odd of children, were submitted for examination by the attendance department owing to absence from school, and the remaining cases were either from Head Teachers, frequently at the parents' request, or Routine Cases seen for further examination purposes. The examination of these cases takes place on Wednesday afternoons and Saturday mornings.

"FOLLOWING UP."

Excellent work has again been done by the School Nurse in connection with the following up of children with defects, although

not so much time has been devoted to this work this year as in the previous year, owing to the School Nurse being occupied each morning at the Treatment Clinic. I do not think, however, the results obtained have proportionately suffered, as the difficult parents, in my opinion, are becoming educated to realise in many ways the benefits accruing to their children from this new work, which, to commence with, was rather regarded as an undue interference, and consequently there are not the same difficulties experienced, except in regard to the treatment of cases of Defective Vision, already referred to elsewhere. Owing to the resignation of my clerical assistant, I was compelled to withdraw the Nurse from her outside work during the last two months of the year, in order to assist in other work. 645 cases were supervised by the School Nurse at home and 364 cases at school, entailing 1110 visits to homes and 446 visits to Schools. I was also able myself to continue the following up and re-examination of 714 children with defects which had been detected at previous visits to the schools.

INVALID CHILDREN'S AID COMMITTEE.

I have again to place on record the valuable assistance rendered to the work of the School Medical department by the various Voluntary Lady Workers, who were instrumental in securing the necessary treatment of many school children during the year.

80 children with Defective Vision were supervised and assisted in procuring spectacles, 28 of whom were escorted to Newcastle-upon-Tyne for treatment. 10 children had surgical appliances supplied to them at a very much reduced cost to the parents. 4 children were assisted in other ways.

BOROUGH OF TYNEMOUTH HOLIDAY AGENCY.

The following report states shortly the excellent work carried out by this Society on behalf of Elementary School Children.

Out of 196 applications made by Head Teachers, School Nurse or Members of the Committee, 134 children were sent to the

country for a holiday, usually for 14 days duration, of whom 50 were boys and 84 girls. In all cases the report on the child after return has been that it has greatly improved and enjoyed the holiday.

N.S.P.C.C.

13 parents were reported to this Society during the year.

ALDERMAN ISAAC BLACK'S BOOT AND SHOE FUND.

In connection with the provision of footgear to school children, I am indebted to the Chairman of the Education Committee for the following particulars of the above local fund, which, to my knowledge has been the means of providing shoes for many children reported by the School Medical department.

This fund has now been in active existence 30 years, and was originally established by the present Chairman of the Education Committee, and has been solely administered by him up to the present time. It was started for the purpose of providing out of voluntary funds meals, boots and shoes to deserving children attending the elementary schools.

Over 10,000 pairs of boots and stockings have been given away. For the year ending the 31st October, 1914, 597 pairs were distributed, and during the present winter 650 pairs of boots have been given away. The Head Teachers supply the names of the children requiring boots and issue tickets, which are taken by the parents to the local boot shops where they are supplied.

JUVENILE EMPLOYMENT.

The co-operation of the work of the School Medical Service with that of the Juvenile Advisory Committee was commenced during the past year and continues to develop. The importance of

the examination of Leavers and the correction of any physical defects found before leaving school, is emphasised by this association, so that scholars may be physically capable of entering upon a career successfully. The main purpose of the Juvenile Advisory Committee being to ensure that Boys and Girls are drafted into suitable occupations, it is sometimes necessary that defects likely to concern their employment are confidentially communicated to the Committee.

It is exceedingly difficult to know how far the School Medical Officer should divulge the defects of Leavers, when neither the boy nor the parent may have as yet made up their mind as to what occupation the child is to be put to, and it will be readily understood that defects vary considerably in importance and degree, and that while a certain defect would concern a particular employment it would not necessarily do so in others. At present the Medical Inspection Card of Leavers with defects likely to affect their future career have remarks placed by me under the heading "Juvenile Advisory Committee," the Head Teachers transferring such remarks on to the Juvenile Employment Cards. Should any difficulty be experienced by the Secretary of the Juvenile Advisory Committee in construing or gauging the importance of these remarks an interview and, if necessary, an examination of the child clears up the difficulty. I hope this year to adopt the principle, as far as possible, of endorsing the Medical Inspection Card of defective Leavers with remarks pertaining to their unsuitability for certain occupations.

EMPLOYMENT OF CHILDREN OUT OF SCHOOL HOURS.

During the year 1914 I made a record of the nature and hours of employment of Boys leaving School, who were employed out of school hours, and tabulated these results in a register with their Height, Weight, Nutrition and Physical Defects.

The number of boys and hours employed was as follows :—

TABLE VII.

Hours employed per week.	12 yrs. old. Number employed.	13 yrs. old. Number employed.
Occasional	6	10
Under 5	3	1
5-10	4	6
10-15	10	9
15-20	12	25
20-25	26	25
25-30	20	32
30-35	8	7
35-40	4	1
40-45	—	1
	93	117

The results can be stated thus, divided into boys of 12 and 13 years old respectively.

Twelve Years Old.—93 boys were employed out of 465 of similar age examined. 52 were Errand Boys, 29 Paper Boys, 4 Milk Boys, 3 Barber's Boys, 2 occupied in Fish and Chip Shops, 1 Theatre Boy, 1 Billiard Boy and 1 Boxmaker.

The average height and weight was up to the standard of the 12 year old boys examined during the year.

12 were subnormally nourished, 9 had defective Vision, and 3 defects of other kinds.

Thirteen Years Old.—117 were employed out of 418 of similar age examined. 65 were Errand Boys, 31 Paper Boys, 10 Barber's Boys, 3 Milk Boys, 3 Theatre Boys, 2 Carter's Boys, 1 Printer's Boy, 1 Farmer's Boy, and 1 Coal Cart Boy.

The average height and weight was up to the standard of the 13 years old boys examined during the year.

18 were subnormally nourished ; 17 had defective Vision, and 6 defects of other kinds.

The general impression conveyed to me throughout the year was that where the employment was of an outside nature these boys were taking no harm from a physical standpoint, but that where the employment was indoors, particularly all day on Saturdays and sometimes even an hour or two on Sundays, there were signs to show the undesirability of continuance. Such physical defects as these boys had, could not be attributed to their employment.

Head Teachers have, however, undoubtedly found a tiredness and lack of response in school amongst some of these boys employed late the previous night or very early in the morning before school. Incidentally I discovered that there were still certain boys employed as late as 10 o'clock on a Friday night and 11 o'clock on a Saturday night, though this became in March of this year a punishable offence on the part of the employer.

It was suggested to these boys, closely confined all day on a Saturday, or after School hours during the week, that they should try and get employment outside. While not wishing to unduly interfere with these school boys earning a small sum each week, I do, however, consider that their employment should not commence before say 8 a.m. in winter months and 7-30 a.m. in summer months, and not at all between morning and afternoon school. While, no doubt, the money earned was in the vast number of cases going towards the maintenance of the home, yet quite a number appeared to be from homes not requiring additional help, and so the money earned was pocket money and the necessity for employment did not arise. I think it would be fairly safe to say that many elder girls have home duties to perform out of school hours, which have a more injurious effect than the outside employment of older boys.

MENTALLY DEFECTIVE AND PHYSICALLY DEFECTIVE CHILDREN.

In accordance with the provisions of the Mental Deficiency Act (1913) it is the duty of a Local Education Authority—

- (a) to ascertain the existence of mental defect of such kind or degree as to justify the diagnosis of feeble-mindedness, imbecility, or idiocy ;
- (b) to determine whether a child diagnosed as feeble-minded is or is not capable of benefiting from education in a Special School ;
- (c) to notify to the Local Authority under the Mental Deficiency Act any defective child over the age of 7 years who falls into one of the following categories :—
 - (i) those who are not capable of benefiting from education in Special Schools ;
 - (ii) those who cannot be instructed in a Special School without detriment to other children ;
 - (iii) those who are certified by the Board of Education to require supervision or guardianship under the Mental Deficiency Act ; and
 - (iv) those who after leaving the Special School need institutional treatment or guardianship.

In conjunction with the above the first section of the Elementary Education (Defective and Epileptic Children) Act, 1914, which came into operation on January 1st, 1915, should also be read, viz. :—

“ Where a Local Education Authority have ascertained that there are in their district defective children, they may, and in the case of mentally defective children whose age exceeds seven years, shall, make provision for the education of such children.”

The Board of Education issued model arrangements and regulations for the purpose of assisting Local Education Authorities in carrying

out the duties, and these arrangements were adopted by this Committee.

The Head Teachers of the various departments throughout the Borough were circularised in the month of June, asking them to bring to the notice of the S.M.O., for the purpose of examination by him, all children who, in their opinion, were either extremely dull and backward or Mentally Defective within the meaning of the Act. As the Education Committee were desirous of obtaining at the same time an approximate number of physically defective children, at present attending the ordinary Elementary Schools, who would be better educated on open-air principles in a special school, Head Teachers were also asked to bring to the S.M.O.'s notice any of these latter children.

The number of children brought to the School Clinic was such that the month of July, up to the closing of the Educational year, was practically monopolised by this work.

The number of children examined was 324. The results can be best shown in tabular formation, as follows :—

TABLE VIII.

A.	BOYS.	GIRLS.
Feeble-minded	7	7
„ (Borderland)	4	5
Extremely dull and backward		
some of whom are probably		
feeble minded	12	6
	—	—
	23	18
B.		
Physically defective	70	124
	—	—
Total	93	142
	—	—

In addition to the children classified as Mentally or Physically defective, there were 20 children in whom no defect of sufficient importance was found, and 69 children who could continue to attend an ordinary Elementary School.

MENTALLY DEFECTIVE.

As will be seen from the table a number of the children were classified as Dull or Backward, requiring education on a modified curriculum with smaller classes, so that more individual attention could be given to them. Time, and the Head Teacher's report should then materially assist one in coming to a more definite opinion as to whether these children are likely to be capable of being redrafted back to the ordinary elementary school, or to be more fitted for a school for the Mentally Deficient, or to remain where they are. Incidentally I think there is still a degree of confusion in the minds of certain Head Teachers as to what degree of mentality constitutes a feeble-minded child, and unavoidably the personal equation comes into play ; consequently the class and number of children presented from the different departments varied considerably. While I think one can be on fairly sure ground in deciding almost immediately that a certain child is feeble-minded, yet, there are a great many other children whose mental condition it is quite impossible to define as the result of a single examination, and this is not to be wondered at, as the child is strange to you, and your surroundings, however coaxing your examination may be, therefore though you may have your doubts, the only proper course is to observe these children for a time after they have been placed in a special class and to classify them as Borderland cases.

PHYSICALLY DEFECTIVE.

It will be seen from the above table that the number of children likely to benefit physically from education at a Day Open-Air School is a high one. Amongst the children usually educated in this form of school for a period of some months are those suffering from General Delicacy, Malnutrition, Anaemia, Convalescents from illness and operation, and suspected or certain cases of Pulmonary or Non-Pulmonary Tuberculosis. The majority of these children are also mentally backward due to their poor physical condition and irregular attendance at school. In my report for 1912 I suggested one way of commencing the education of these children, and drew the attention of the Committee to the fact of special grants from the Board of Education being available

In addition to the number of Mentally or Physically defective children presented for examination last July, there were other children of whom we had a record who, in my opinion, were to be classified similarly. Owing to the close relationship between the physical and mental aspects of both these classes of children their education should, as far as possible, be conducted on open air lines. The grants payable by the Board of Education amount to £6 in the case of the mentally defective, and in the case of the physically defective attending a Day Open-Air School £6, plus a Treatment Grant not exceeding £3 per head of average attendance.

The Special Sub-Committee appointed to deal with the further education of these Mentally and Physically defective children are proposing to visit two or three of the recently erected special schools in this country, and will then report to the Education Committee.

DULL AND BACKWARD CHILDREN.

A register was kept during 1914 of those children classified as dull or backward by teachers, in which was recorded the nutrition and any physical defects associable with the mental dullness.

I have made no comment upon 168 children recorded as only 1 year backward. The results of those classified as 2 or more years mental retardation, divided into boys and girls, were as follows :—

Boys.—Of 103 cases recorded, representing 7% of the number of children examined in the Intermediate and Leavers Groups, 68 were mentally retarded two years, 25 three years, and 10 four years. 19 were recorded as subnormally nourished, 16 as having defective vision, 3 defective hearing, 2 enlarged tonsils and adenoids, 6 combined defects of nutrition, sight and hearing, 2 other defects, and 55 for which no specific reason could be assigned, except in the case of 7 who were classified as from bad homes, and in the case of some of the remainder irregular attendance.

Girls.—Of 110 cases recorded, representing 7% of the number of children examined in the Intermediate and Leavers Groups, 62 were mentally retarded two years, 38 three years, 10 four years. 15 were recorded as subnormally nourished, 13 as having defective vision, 10 defective hearing, 1 enlarged tonsils and adenoids, 8 combined defects of nutrition, sight and hearing, 7 other defects, and 56 for which no specific reason could be assigned, except in the case of 18 classified as from bad homes, and in the case of some of the remainder irregular attendance.

It will be apparent, therefore, that there are a considerable number of children retarded mentally on account of physical defects, the early amelioration of which should assist in the mental recovery of some of these children.

PROVISION OF MEALS.

Education (Provision of Meals) Act, 1914.

The effect of the new Act may shortly be stated as follows :

- (a) It legalises the provision of meals during holidays and on other days when the school is not open.
- (b) It repeals the limit imposed by section 3 of the Education (Provision of Meals) Act, 1906, under which the expenditure of the Local Education Authority on the provision of food was limited to the produce of a halfpenny rate.
- (c) It abolishes the necessity of obtaining the sanction of the Board of Education to expenditure out of the rates on the provision of food.

The Provision of Meals for School Children was not considered necessary in this Borough until some time after war had been declared and its effects began to be felt upon the local fishing industry and its subsidiary trades, together with the miners and casual labourers at the docks.

In September last the Committee requested me to make investigations into the matter, and it was upon my recommendation, and after considering the returns submitted by the Head Teachers, that the Committee came to the decision to commence feeding the School Children.

During the time the preliminary inquiries were being made the feeding of the worst cases was undertaken at Schools and other Centres as from the 21st September. The complete scheme came into operation on the 26th October, 1914.

SCHEME.—The following scheme was adopted :—

- (1) That all food be prepared at one Central Cooking Department, viz., the Soup Kitchen, Wellington Street, North Shields, and distributed to the various Feeding Centres.
- (2) That Feeding Centres be arranged as found necessary.
- (3) That a woman Cook and a woman Assistant be appointed to take charge of the Central Cooking Depot.
- (4) That a paid Caretaker be appointed for each Feeding Centre.
- (5) That Teachers and other Honorary Helpers be invited to assist in the supervision of the children at the Feeding Centres.
- (6) That temporary clerical assistance be obtained to deal with the extra clerical work and registration.
- (7) That tenders be obtained for apparatus and materials required.
- (8) That a Menu be drawn up by the Chairman of this Committee and Dr. McConnell and submitted to a later meeting.*
- (9) That cases be reported in the first instance by the Head Teachers to the Secretary.
- (10) That all cases be investigated by the School Attendance Officers.
- (11) That no child be provided with food until the case has been approved by a Special Sub-Committee.†

* The supply of one-course dinners, as suggested by the Board of Education in Circular 856, dated 15th August, 1914, was adopted.

† Exceptions have been made on the recommendation of the Asst. School Medical Officer.

- (12) That books of Tickets to last four weeks (one Ticket for each day) be adopted.
- (13) No child must be admitted to a Feeding Centre except on production of an authorised Ticket.
- (14) That the draft of proposed Circular to be issued to parents be approved.
- (15) That the Chairman and Secretary be authorised to purchase any necessary apparatus.
- (16) That the Medical Inspection Sub-Committee, with the Mayor, Councillor H. Gregg, be constituted the School Canteen Committee, with full power to carry out the feeding of School Children and to co-opt members if found necessary or advisable.
- (17) That the Committee be divided into three Rota Sub-Committees to interview parents, etc., from time to time.
- (18) The following Feeding Centres were arranged :—
 St. Faith's Mission, Hudson Street.
 Salvation Army Hall, Prudhoe Street.
 Howdon Road Co-operative Store.
 Chirton Co-operative Store.
 Cullercoats.
- (19) That dinners be provided on the five school days per week.

MANAGEMENT OF FEEDING CENTRES —The following regulations were adopted :—

- 1. One person shall act as Superintendent, whose duty it will be from time to time to report as to the quality and quantity of the food supplied, forward the tickets given up by the children to the Education Office each day immediately dinner is over, and generally to exercise control of the Feeding Centres.
- 2. Grace shall be said or sung once at each meal.
- 3. No child shall be admitted without an authorised dinner ticket.
- 4. That each child be served with food and that the whole of the food supplied to each particular centre be apportioned to the number of children who attend that day. The older children to be supplied with a larger portion and the younger with a smaller portion.

5. Strict discipline must be enforced. Children who disobey orders may be refused dinner and removed from the Feeding Centre at the discretion of the Superintendent. In all such cases the names and addresses, together with a report of the circumstances, must be sent to the Education Office the same day by the Superintendent

Trestle tables with loose White American Cloth covers together with the necessary spoons, forks, knives, plates, etc., were provided for each Feeding Centre. In addition, a small boiler was fixed at each Centre for the purpose of keeping the food warm and heating water for washing purposes. (Note.—A large portion of the apparatus was already in stock, having been purchased when the feeding of School Children was previously undertaken by the Committee).

VOLUNTARY WORKERS.—The Committee invited the co-operation of the Teachers and other voluntary workers to assist in the preservation of order at the Feeding Centres and in the serving of the meals, and a most hearty response was the outcome of such appeal; the Teachers especially giving great assistance in this work and the Committee, I am sure, are very grateful to them.

CO-ORDINATION OF MEDICAL SERVICE.—I have kept in close touch with the detailed administration in connection with the Provision of Meals, and the Medical Inspection Sub-Committee—which has been made a standing Sub-Committee of the Education Committee—has dealt with the whole question. I have visited several Schools along with the Chairman of the Medical Inspection Committee and discussed the feeding of the children with the various Head Teachers. I also examined the children generally upon such visits and in view of my observations at the ordinary inspections and upon the special visits to the Schools previously referred to, I was satisfied that feeding was necessary. In order to check the results of the feeding, I have arranged for the School Nurse to take a number of children from each Feeding Centre and take periodical records of their weight, nutrition, etc.

Arrangements have been made that any cases found by me at the routine inspections who require feeding, may be placed on the list at once.

NUMBER OF MEALS.—The following statement shows the number of meals which have been provided since the feeding commenced in September last :—

SUMMARY OF NUMBERS.

Week ending Oct. 30th, 1914.....	1413
„ „ Nov. 6th, „	1571
„ „ Nov. 13th, „	2222
„ „ Nov. 20th, „	2134

Total for 1st 4 weeks	7340
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Week ending Nov. 27th, 1914.....	2341
„ „ Dec. 4th, „	2282
„ „ Dec. 11th, „	1751
„ „ Dec. 18th, „	1498

Total for 2nd 4 weeks	7872
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Xmas Week ending Dec. 24th, 1914	1074
Note no feeding on Xmas Day.	
New Year Week ending Dec. 31st	1047
Note no feeding on New Year's Day.	

Total for 2 weeks	2121
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The number of meals supplied from 26th Oct., 1914, to 31st Dec., 1914, was 17333.

The number of meals supplied (Temporary Feeding) from 21st Sept. to 23rd Oct., 1914, was 1273.

Total number of meals supplied, 18606.

FEEDING DURING THE HOLIDAYS.—It was decided to feed the children during the Christmas Holidays, with the exception of Christmas and New Year's Day.

CO-OPERATION WITH OTHER AGENCIES.—In view of the danger of overlapping in the distribution of grants by the local Relief Committee, information has been supplied to them of parents whose children were provided with meals.

On the other hand, the Relief Committee have recommended cases to the Education Committee for feeding. The Voluntary Workers and the School Attendance Officers have also recommended any suitable cases for the consideration of the Committee.

SPECIAL CASES —Special Cases which have come under my notice requiring emulsion, or other special dietary, have been referred to the Invalid Children's Aid Committee, and they have kindly provided them with the necessary special foods (milk, emulsion, cod liver oil, etc) as recommended by me.

COST.—It is estimated that the total cost will work out at about 3d. per meal ; the food only costing about 2d. per meal.

EXAMINATION OF TEACHERS.

During the year 6 Bursars and 7 Teachers were examined, all of whom were found satisfactory.

A NUMERICAL RETURN OF ALL EXCEPTIONAL CHILDREN IN THIS AREA IS SHOWN IN TABLE IX.

Two children with very limited vision, and 5 children with a marked degree of deafness are attending the ordinary schools, but despite these afflictions are making headway, due entirely to the individual and sympathetic attention of the class teachers; 2 children with eye defects are prohibited from attending school; 3 epileptic children are unfit for school; 1 epileptic may be able to resume attendance at school.

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TABLE IX.

			Boys	Girls	Total
BLIND (including partially Blind).		Attending Public Elementary Schools .	—	2	2
		Attending Certified Schools for the Blind	2	3	5
		Not at School	1	1	2
DEAF AND DUMB (including partially Deaf).		Attending Public Elementary Schools .	3	3	6
		Attending Certified Schools for the Deaf	2	3	5
		Not at School	—	—	—
MENTALLY DEFICIENT.	Feeble Minded.	Attending Public Elementary Schools .	9	10	19
		Attending Certified Schools for Mentally Defective Children	—	1	1
		Notified to the Local (Control) Authority during the year.....	—	—	—
		Not at School	2	1	3
	Imbeciles.	At School	—	—	—
		Not at School	—	1	1
Idiots	.....	—	—	—
EPILEPTICS.		Attending Public Elementary Schools .	1	4	5
		Attending Certified Schools for Epileptics	—	—	—
		Not at School	2	2	4
PHYSICALLY DEFECTIVE.	Pulmonary Tuberculosis.	Attending Public Elementary Schools .	9	3	12
		Attending Certified Schools for Physi- cally Defective Children.....	—	—	—
		Not at School	15	6	21
	Other Forms of Tuberculosis.	Attending Public Elementary Schools .	31	40	71
		Attending Certified Schools for Physically Defective Children ...	—	—	—
		Not at School	5	12	17
	Cripples other than Tubercular.	Attending Public Elementary Schools .	7	1	8
		Attending Certified Schools for Physically Defective Children ...	1	—	1
		Not at School	2	1	3
DULL OR BACKWARD		Retarded, 2 years	68	56	124
		„ 3 years or more.....	35	54	89